

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006640

FILED
Apr 04, 2004
Secretary of State**Entity Name:** REMNANT REHABILITATIVE COUNSELING AND OUTREACH SERVICES, INC.**Current Principal Place of Business:**2864 64TH AVE SOUTH
ST PETERSBURG, FL 33712**New Principal Place of Business:****Current Mailing Address:**P.O BOX 11205
ST PETERSBURG, FL 33733**New Mailing Address:****FEI Number:** 59-3756365**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WARNKE, JULIETTE B
2864 64TH AVE SOUTH
ST PETERSBURG, FL 33712**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PTD () Delete
Name: WARNKE, JULIETTE B
Address: 2864 64TH AVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33712**Title:** VD () Delete
Name: ROUSON, DARRYL
Address: 3110 1ST AVENUE NORTH SUITE 5SW
City-St-Zip: SAINT PETERSBURG, FL 33713**Title:** SD () Delete
Name: SHELTON, PERKINS T
Address: 2920 PALLANZA DR SOUTH
City-St-Zip: ST PETERSBURG, FL 33705**Title:** D () Delete
Name: JONES, MARY
Address: 225 - 37TH ST N.
City-St-Zip: SAINT PETERSBURG, FL 33713**Title:** D () Delete
Name: WILLIAMS, RAY
Address: 205-24TH AVE SE
City-St-Zip: SAINT PETERSBURG, FL 33705**Title:** HA (X) Delete
Name: GAINES, ANTHONY
Address: 1520-4TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VD (X) Change () Addition
Name: WILLIAMS, RAYMON
Address: 205 24TH AVENUE SOUTH EAST
City-St-Zip: SAINT PETERSBURG, FL 33705**Title:** HA (X) Change () Addition
Name: HAILE, BRENDA
Address: 808 13TH AVENUE NORTH APT#8
City-St-Zip: ST PETERSBURG, FL 33705**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** LA (X) Change () Addition
Name: ROUSON, DARRYL
Address: 3110 FIRST AVENUE NORTH STE 5W
City-St-Zip: ST. PETERSBUG, FL 33713**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIETTE WARNKE

CEO

04/04/2004

Electronic Signature of Signing Officer or Director

Date