

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002003

FILED  
Sep 09, 2003  
Secretary of State

Entity Name: OUTREACH DEVELOPMENT, INC.

**Current Principal Place of Business:**

259 SPRING COLONY CIR., SUITE 275  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

259 MUIR VILLAGE RD  
ORLANDO, FL 32808

**Current Mailing Address:**

259 SPRING COLONY CIR., SUITE 275  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

259 MUIR VILLAGE RD  
ORLANDO, FL 32808

FEI Number: 01-0627153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRANKS, FREDERICK L JR.  
259 SPRING COLONY CIR., SUITE 275  
ALTAMONTE SPRINGS, FL 32714

**Name and Address of New Registered Agent:**

FRANKS, FREDERICK L JR.  
259 MUIR VILLAGE RD  
ORLANDO, FL 32808

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: FREDERICK L FRANKS

09/09/2003

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MORELAND, FLORRIE  
Address: 4531 ALHAMA ST.  
City-St-Zip: ORLANDO, FL 32811

Title: SD ( ) Delete  
Name: ARMSTEAD, CHERYL  
Address: 895 S. WYMORE RD. #921-D  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TD ( ) Delete  
Name: CHASE, RICARDO  
Address: 5193 CINDERLANE PKWY., #813  
City-St-Zip: ORLANDO, FL 32808

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MCCLOUD, REBEKAH  
Address: 1045 NORTH ST  
City-St-Zip: LONGWOOD, FL 32750

Title: SD (X) Change ( ) Addition  
Name: PAYNE, DAISY  
Address: 1260 SOUTH MASCOT  
City-St-Zip: PALM BAY, FL 32905

Title: TD (X) Change ( ) Addition  
Name: MACKLIN, MICHAEL  
Address: 507 TREE SHORE DR  
City-St-Zip: ORLANDO, FL 32825

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: DAISY PAYNE

SD

09/09/2003

Electronic Signature of Signing Officer or Director

Date