## 2005 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## DOCUMENT # N02000003091



## **FILED** Mar 25, 2005 8:00 am Secretary of State 03-25-2005 90033 004 \*\*\*\*70.00

1. Entity Name RESPONSIBLE CHOICES OUTREACH CENTER, INC.											
Principal Place of Business  564 W. INTERNATIONAL SPEEDYWAY BLVD. DAYTONA BCH, FL 32114  Mailing Address P.O. BOX 10482 DAYTONA BEACH, FL 3212				20		, . <u></u>	JJZJ/	TAL <b>us</b> hii <b>ariun</b> e	NYN 80N8 19N0 N	B)   11    17    18    1	
2. Principal P	lace of Business	3. Ma	failing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03232005 <sub>C</sub>	hg-NP	CR2E0	37 (10/03)	
City & State			City & State				4. FEI Number 02-050830	)2	•		oplied For ot Applicable
Zip	Country Z		ip Cou		ntry		5. Certificate of Si	tatus Desired	<u>K</u>	\$8.75 Ad	ditional
•	6. Name and Address of Current	Register	ed Agent	. [			7. Name and Add	iress of New i	Registered	Agent	
					Name						
KENNEDY, KEITH R 564 W. INTERNATIONAL SPEEDYWAY BLVD. DAYTONA BCH, FL 32114					Street Address (P.O. Box Number is Not Acceptable)						
					City		<del>.</del>			Zip Coo	le
									FL	<u> </u>	
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Filing Fee is \$61.25  Due by May 1, 2005  9. Election Campaign Trust Fund Contribu							\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.	OFFICERS AND DIF	RECTORS	3	11.		A	ADDITIONS/CHANG	ES TO OFFICE	RS AND DI	RECTORS II	<b>√</b> 10
TITLE	D		☐ Delete	TITLE	ı	Memb	er of the	Board		☐ Change	Addition
NAME	COURTNEY, BRENDA NAM 1417 MOLLIE RD. STRE					Shar	lene Barho	00			
STREET ADORESS CITY-ST-ZIP	DAYTONA BCH, FL 32114						W. ISB, Da		each,	FL 321	.14
TITLE	D		☐ Delete	TITLE	1					☐ Change	Addition
NAME	KENNEDY, TANYA			NAME							ŀ
STREET ADDRESS CITY-ST-ZIP	P. O. BOX 10482 DAYTONA BCH, EL. 32120	_			ET ADDRESS ST-ZIP			_	_	<b>.</b>	
TITLE	CD		☐ Delete	TITLE			·			☐ Change	☐ Addition
NAME	KENNEDY, KEITH R		C Delete	NAME						Onlinge	
STREET ADDRESS	P. O. BOX 10482			STREE	ET ADDRESS						!
CITY-ST-ZIP	DAYTONA BCH, FL 32120			CITY-	-ST-ZIP						
TITLE			Delete	THLE						☐ Change	☐ Addition
NAME STREET ADDRESS				NAME							
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP						
TITLE			□ Delete	TITLE						☐ Change	Addition
NAME			Bulleto	NAME							
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP				_	-ST-ZiP						
TITLE NAME			☐ Delete	TITLE						☐ Change	☐ Addition
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP				CITY-	-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other Iliconomy.											
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SIGNAT	SIGNATURE: Keith R. Kennedy 3-22-05 (386) 248-2228										