2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# N02000003343

Entity Name: DOVE OUTREACH CENTER, INC.

Current Principal Place of Business:

3503 PEARL STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

3503 PEARL STREET
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 57-1136804 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ZEIGLER, REBECCA
10944 LYDIA ESTATES DRIVE EAST
JACKSONVILLE, FL 32218 US

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: P ( ) Delete
Name: ZEIGLER, REBECCA L
Address: 10944 LYDIA ESTATES DR E
City-St-Zip: JACKSONVILLE, FL 32218

Title: T ( ) Delete
Name: BOLDEN, VIVIAN D
Address: 115 E 25TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: S ( ) Delete
Name: SUGGS, REGINA
Address: 3147 KENISTEN LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: T ( ) Delete
Name: JOHNSON, HIWATHA
Address: 1562 MENLO AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete
Name: JOHNSON, NAJERA J
Address: 10944 LYDIA ESTATES DR E
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change ( ) Addition
Name: EDWARDS, ARTARSHIA N
Address: 4247 3RD AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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: REBECCA L. ZEIGLER P 05/02/2006

Electronic Signature of Signing Officer or Director — Date