2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005931

Entity Name: HEAVENLY OUTREACH CENTER, INC.

4753 AUSTRALIAN AVENUE

WEST PALM BEACH, FL 33407

Address: City-St-Zip: FILED Jan 06, 2003 Secretary of State

Littly Nai	HE. HEAVE	NET OUTREACTICENTER, INC	,.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LUE HERON BEACH, FL 33	BLVD., STE. 107 3404			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX RIVIERA B	10712 BEACH, FL 33	3419			
FEI Number: 65-1152066 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
4152 W. B SUITE 107	PATRICIA A LUE HERON BEACH, FL 33				
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FULTON, PAT	HERON BLVD., STE. 107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FULTON, KOR 810 20TH STR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (NORTHERN, M) Delete //ARY	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PATRICIA FULTON DCOE 01/06/2003