

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# N03000003456

Entity Name: CITY MISSION FAMILY OUTREACH, INC.

Current Principal Place of Business:

6531 SUNSET STRIP UNIT 18
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

730 E. EVANSTON CIRCLE
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 11-3686360 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYLOR, YVONNE
730 E. EVANSTON CIRCLE
FORT LAUDERDALE, FL 33312 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: PD () Delete
Name: MAYLOR, YVONNE
Address: 730 E. EVANSTON CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD () Delete
Name: MAYLOR, STEWART
Address: 730 E. EVANSTON CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD () Delete
Name: DAWES-MORGAN, NADIA
Address: 3860 JASMINE LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD () Delete
Name: HOPWOOD, CYNTHIA
Address: 5348 N.W. ALAM COURT
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D () Delete
Name: MORGAN, ORAL
Address: 3860 JASMINE LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: BROWN, SHAHARA
Address: 4821 N.W. 8TH STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: YVONNE MAYLOR

PD

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date