

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006120

FILED
Apr 17, 2007
Secretary of State

Entity Name: REDWOOD MINORITY OUTREACH PROGRAM, INC.

Current Principal Place of Business:

3402 WILLOW WOOD ROAD
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

3402 WILLOW WOOD ROAD
LAUDERHILL, FL 33319

New Mailing Address:

9180 SILVER GLEN WAY
LAKE WORTH, FL 33467

FEI Number: 20-0116113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MYRICK, RODERICK
Address: 3402 WILLOW WOOD ROAD
City-St-Zip: LAUDERHILL, FL 33319

Title: VD () Delete
Name: MYRICK, AMANDA
Address: 3402 WILLOW WOOD ROAD
City-St-Zip: LAUDERHILL, FL 33319

Title: TD () Delete
Name: MYRICK, DEBORAH
Address: 3402 WILLOW WOOD ROAD
City-St-Zip: LAUDERHILL, FL 33319

Title: SD () Delete
Name: MULLINGS, NADINE M
Address: 3402 WILLOW WOOD ROAD
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PRESIDENT/RODERICK MYRICK

PD

04/17/2007

Electronic Signature of Signing Officer or Director

_____ Date