2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009493

Entity Name: FRENCHTOWN OUTREACH CENTER, INC.

FILED May 02, 2007 Secretary of State

ncipal Place of Business:
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527 W. BREVARD STREET TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

527 W. BREVARD STREET TALLAHASSEE, FL 32301

FEI Number: 20-0448241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

BROWN, RITA 5578 PEDRICK PLANTATION CIR TALLAHASSEE, FL 32317 US

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:

Floatenia Cinnatura of Danistana d Annat

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T3
 () Delete
 Title:
 T (X) Change () Addition

 Name:
 HOLMES, CRYSTAL
 Name:
 YADETE, ETEFWORK

 Address:
 1417 NANCY DR
 Address:
 2210 MULBERRY BLVD

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32306

Title: C () Delete Title: C (X) Change () Addition

 Name:
 BROWN, RITA
 Name:
 PHOENIX, CHERYL

 Address:
 5578 PEDRICK PLANTATION CIR
 Address:
 4154 BREWSTER RD

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:
 TALLAHASSEE, FL 32308

 $\label{eq:title:Title:D} {\sf Title:} \qquad {\sf VC} \qquad (\) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \ {\sf Change} \ (\) \ {\sf Addition}$

 Name:
 HAMILTON, JOHN
 Name:
 HAMILTON, JOHN

 Address:
 3448 GENTLE WIND WAY
 Address:
 3448 GENTLE WIND WAY

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:
 TALLAHASSEE, FL 32317

 Name:
 MASSEY, ANGELAJ
 Name:
 MASSEY-HILL, ANGELAJ

 Address:
 2665 TOPAZ WAY
 Address:
 2665 TOPAZ WAY

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:
 TALLAHASSEE, FL 32309

Title: D () Delete Title: VT (X) Change () Addition

Name:BOONE, KATRINAName:EDWARDS, KALENAAddress:2500 UNIVERSITY CENTER PKWY, BLDG CAddress:1343 AIRPORT DR UNIT H-11City-St-Zip:TALLAHASSEE, FL 32306City-St-Zip:TALLAHASSEE, FL 32304

Title: D () Delete Title: S (X) Change () Addit

 Title:
 D
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 (X) Change () Addition

 Name:
 ROOP, MEREDITH T
 Name:
 GRANT, GENA

 Address:
 1500 EAST PARK AVE
 Address:
 1031 CROSSING BROOK WAY APT 3

City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: TALLAHASSEE, FL 32311

I hereby certify that the information supplied with this filing does not qualify 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: CASSIE HAMMOCK ED 05/02/2007