

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003827

FILED
Apr 27, 2005
Secretary of State

Entity Name: DAUGHTER OF ZION OUTREACH INC.

Current Principal Place of Business:

1210 SE 24 AVENUE
SUITE 1
CAPE CORAL, FL 33990

Current Mailing Address:

1210 SE 24 AVENUE
SUITE 1
CAPE CORAL, FL 33990

New Principal Place of Business:

3049 CLEVELAND AVENUE
SUITE 250K
FORT MYERS, FL 33901

New Mailing Address:

3049 CLEVELAND AVENUE
SUITE 250K
FORT MYERS, FL 33901

FEI Number: 84-1644704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLWOOD, LEA
1210 SE 24 AVENUE
CAPE CORAL, FL 33990 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: MILLWOOD, LEA
Address: 1210 SE 24 AVENUE
City-St-Zip: CAPE CORAL, FL 33990

Title: VP () Delete
Name: PERRY, TASHEEKIA
Address: 4307 18TH STREET
City-St-Zip: LEHIGH ACRES, FL 33971

Title: S () Delete
Name: MILLER, JEANETTE
Address: 23144 DONALDA AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: T () Delete
Name: BROWN, ADRIANE
Address: 73 SILVER OAKS CIRCLE #10202
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: MILLWOOD, LEA
Address: 1210 SE 24 AVENUE
City-St-Zip: CAPE CORAL, FL 33990

Title: P (X) Change () Addition
Name: FINNIE, SHERICE
Address: 1827 SE 13TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

Title: V (X) Change () Addition
Name: WALKER, WENDY
Address: 1207 DUNNDALE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: T (X) Change () Addition
Name: MCEWEN, LYNN
Address: 6050 PGA DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33917

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.

SIGNATURE: LEA MILLWOOD

ED

04/27/2005

Electronic Signature of Signing Officer or Director

Date