

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

5 Jun 29, 2005 8:00 am
Secretary of State

05-05-2005 90098 015 ****61.25

DOCUMENT # N04000004883 1. Entity Name TAMPA BAY OUTREACH, INC.					
Principal Place of Business 1417 HOLLAND AVENUE TAMPA, FL 33612			Mailing Address 1417 HOLLAND AVENUE TAMPA, FL 33612		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1920 Mendel Ave Suite, Apt. #, etc.			
City & State Zip		City & State Tampa, FL Zip 33612		4. FEI Number 59-3744983 Applied For ☐ Not Applicable	
Country		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOCH & ASSOCIATES, P.A. 500 EAST KENNEDY BOULEVARD #100 TAMPA, FL 33602				7. Name and Address of New Registered Agent Name Jackson, Ka Shon Street Address (P.O. Box Number is Not Acceptable) 1417 E. Holland Ave City Tampa FL Zip Code 33612	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Ka Shon Jackson</u> <u>Ka Shon Jackson Executive Director 6-24-05</u> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P AUSTIN, SAUGHANTO 1417 HOLLAND AVENUE TAMPA, FL 33612	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DORSEY, THOMAS 1417 HOLLAND AVENUE TAMPA, FL 33612	☒ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DORSEY, JENISE 1417 HOLLAND AVENUE TAMPA, FL 33612	☒ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ACEO AUSTIN, QUEEN 1417 HOLLAND AVENUE TAMPA, FL 33612	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		T Perry, Patrick 1417 E. Holland Ave Tampa, FL 33612			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		S Jackson, Ka Shon 1417 E. Holland Ave Tampa, FL 33612			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Bishop Saughanto Austin</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				3-10-05 813-300-6274 Date Daytime Phone #	

Bishop Saughanto Austin