## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005227

FILED Mar 21, 2006 Secretary of State

Entity Name: THE OUTREACH CENTER OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

1022 LAKELAND HILLS BOULEVARD 250 VAN FLEET DR

LAKELAND, FL 33805 US BARTOW, FL 33830 US

Current Mailing Address: New Mailing Address:

PO BOX 92980

LAKELAND, FL 33804 US

FEI Number: 20-1057559 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAIUZZO, PAUL STEINER, DON 1022 LAKELAND HILLS BOULEVARD 250 VAN FLEET DR

LAKELAND, FL 33805 US BATROW, FL 33830 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: DON STEINER 03/21/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: PSD (X) Change () Addition

Name: ELLIS, KENNETH Name: STEINER, DONALD

 Address:
 84 LAKE WIRE DRIVE
 Address:
 520 SHALISA BLVD

 City-St-Zip:
 LAKELAND, FL 33815
 City-St-Zip:
 AUBURNDALE, FL 33823 US

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

Name: EDWARDS, DWIGHT Name: STEINER, MARIALENA

Address: 1801 HAVENDALE BOULEVARD Address: 520 SHALISA BLVD
City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: AUBURNDALE, FL 33823 F

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

Name: BEALS, KEN Name:

 Address:
 1010 EAST MEMORIAL BOULEVARD
 Address:

 City-St-Zip:
 LAKELAND, FL 33801
 City-St-Zip:

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

 Name:
 THOMAS, RANDY
 Name:

 Address:
 300 NORTHEAST FIRST AVENUE
 Address:

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:

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

 Name:
 PEAK, ANITA C
 Name:

 Address:
 1022 LAKE AND HILLS BLVD
 Address:

 City-St-Zip:
 LAKELAND, FL 33805
 City-St-Zip:

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

 Name:
 STEINER, DON
 Name:

 Address:
 520 SHALISA BLVD
 Address:

 City-St-Zip:
 AUBURNDALE, FL 33823
 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: DONALD STEINER PRS 03/21/2006