2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006549

Title:

Name:

Address:

City-St-Zip:

Entity Name: ISLAND OUTREACH, INC.

FILED Jan 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2000 N. CONGRESS LOT #12 WEST PALM BEACH, FL 33409 **New Mailing Address: Current Mailing Address:** 2000 N. CONGRESS LOT #12 WEST PALM BEACH, FL 33409 FEI Number: 27-0128214 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: HALL, MARK R ESQ 124 FAULKNER STREET NEW SMYRNA BEACH, FL 32168 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CROWE, RANDY L Name: Name: Address: 2000 N. CONGRESS, LOT#12 Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ALBURY, RALPH Name: Address: 2000 N CONGRESS, LOT #12 Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: () Change () Addition CREVASSE, LINDA Name: Name: Address: 351 FREEMAN AVE Address: City-St-Zip: NEW SMYRNA BEACH, FL 321687 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RANDY L. CROWE **PRES** 01/09/2008

() Delete

PETERS, MABEL

1365 SNELL ISLE BLVD

ST PETERSBURG, FL 33704

() Change () Addition