

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000010159
 1. Entity Name
LOVING HANDS OUTREACH COMMUNITY DEVELOPMENT CORPORATION



Principal Place of Business
**1300 NE 38TH STREET
 OAKLAND PARK, FL 33334**

Mailing Address
**1300 NE 38TH STREET
 OAKLAND PARK, FL 33334**



07092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-2063838

Applied For
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**OLIVER, DEBBIE
 1300 NE 38TH STREET
 OAKLAND PARK, FL 33334**

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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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO WATTS, WILLIAM 1547 N.E. 39TH STREET OAKLAND PARK, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATTS, BIRDIE 1211 NW 46TH STREET FT. LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENHAM, CATHY 409 S.W. 3RD AVENUE BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENHAM, TIMOTHY 409 S.W. 3RD AVENUE BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLIVER, DEBBIE 1300 NE 38TH STREET OAKLAND PARK, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 07/13/07-80010-007 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: PCEO William J. WATTS **7-11-07** **954-568-4921**
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #