## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Feb 22, 2006 8:00 am Secretary of State **DOCUMENT # N05000000249** 02-22-2006 90007 029 \*\*\*\*70.00 DAUGHTERS OF DORCAS OUTREACH MINISTRY, INC. Principal Place of Business Mailing Address **4410 MERCADO DRIVE 4410 MERCADO DRIVE** SEBRING, FL 33872 SEBRING, FL 33872 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02162006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number Applied For Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HILL, RUTH Street Address (P.O. Box Number is Not Acceptable) 4410 MERCADO DRIVE SEBRING, FL 33872 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. PTD TITLE ☐ Delete TITE F ☐ Addition HILL, RUTH MAME NAME STREET ADDRESS 4410 MERCADO DRIVE STREET ADDRESS SEBRING, FL 33872 CITY-ST-79P CITY-ST-7IP VTD Defete TITLE Change ■ Addition TITLE CAMPBELL, VIRGINIA NAME NAME 1512 CITRUS TERRACE STREET ADDRESS STREET ADDRESS SEBRING, FL 33870 CITY-ST-ZIP CITY-ST-ZIP Delete Change TITLE TITLE ☐ Addition Patricia Milton FAYSON, THELMA NAME NAME 1520 Citrus Terrace Bebring Florida 33870 STREET ADDRESS 118 STATE DRIVE STREET ADDRESS City-ST-ZIP SEBRING, FL 33870 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition WEATHERS, DEBORAH A NAME 1811 SAND TRAP CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEBRING, FL 33872 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MILTON, PATRICIA NAME STREET ADDRESS 1520 CITRUS TERRACE STREET ADDRESS CRY-ST-7IP SEBRING, FL 33870 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

INTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-06

FILED