

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003159

**FILED**  
**Jan 10, 2010**  
**Secretary of State**

**Entity Name:** FRIENDSHIP COMMUNITY OUTREACH CENTER, INC.

**Current Principal Place of Business:**

29608 CAMP ROAD-LANE PARK  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1844  
TAVARES, FL 32778

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WATKINS, MICHAEL J  
805 SUMMERALL AVE.  
TAVARES, FL 32778 US

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

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:**

Title: D  
Name: WALKER, REGINALD  
Address: P.O. BOX 1102  
City-St-Zip: UMATILLA, FL 32784

Title: D  
Name: RAHMING, SAMUEL  
Address: 416 INGRAM AVE.  
City-St-Zip: TAVARES, FL 32778

Title: D  
Name: LUCAS, WILLIAM  
Address: 180 RAND CT.  
City-St-Zip: APOPKA, FL 32703

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL J. WATKINS

**REV.**

**01/10/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date