2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N05000008732

Entity Name: DOOR OF HOPE OUTREACH, INCORPORATED

Current Principal Place of Business:

901 S.W. 18TH STREET
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

905 S.W. 18TH STREET
FORT LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 20-3429946 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DENIS, JEFF
901 S.W. 18TH STREET
FORT LAUDERDALE, FL 33315 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 ( ) Delete
Name: KAUFFMAN, CHAD
Address: 4355 NW 1ST PLACE
City-St-Zip: DEERFIELD BEACH, FL 334429241

Title: D ( ) Delete
Name: EASTERLY, STUART
Address: 6105 NW 53RD CIRCLE
City-St-Zip: CORAL SPRINGS, FL 330673518

Title: D ( ) Delete
Name: GREBE, RANDY
Address: 5386 NW 60TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 330672721

Title: D ( ) Delete
Name: DENIS, KATHLEEN
Address: 905 SW 18TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: D ( ) Delete
Name: DENIS, JEFF
Address: 905 SW 18TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: D ( ) Delete
Name: YOUNG, DONNA
Address: 3032 NW 69TH CT
City-St-Zip: FT. LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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.

SIGNATURE: JEFF DENIS PRES 01/16/2009

Electronic Signature of Signing Officer or Director — Date