

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003417

FILED
Apr 25, 2009
Secretary of State

Entity Name: WORLDS LARGEST KITCHEN OUTREACH, INC.

Current Principal Place of Business:

1960 W HYDE DRIVE
DELTONA, FL 32738 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4165
ENTERPRISE, FL 32725 US

New Mailing Address:

FEI Number: 20-4642453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIRKGARD, MARY
1960 W HYDE DRIVE
DELTONA, FL 32738 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: P.VP () Delete
Name: KIRKGARD, MARY
Address: 1960 W HYDE DRIVE
City-St-Zip: DELTONA, FL 32738 US

Title: TR () Delete
Name: HUNT, LINDA
Address: 1960 W. HYDE DR.
City-St-Zip: DELTONA, FL 32738 US

Title: S () Delete
Name: SAWYER, JED SR.
Address: 1555 GRAY CT.
City-St-Zip: DELTONA, FL 32738

Title: D () Delete
Name: GARAY, MANUEL
Address: 1296 HEWLAND BLVD.
City-St-Zip: DELTONA, FL 32738

Title: D () Delete
Name: GARAY, NILDA
Address: 1296 HOWLAND BLVD.
City-St-Zip: DELTONA, FL 32738

Title: D () Delete
Name: SPRINGER, SHARON
Address: PO BOX 894
City-St-Zip: LAKE HELEN, FL 32744

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:

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City-St-Zip:

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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: MARY B. KIRKGARD~~~~~`

P.VP

04/25/2009

Electronic Signature of Signing Officer or Director

Date