2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003575

Entity Name: DAYTONA OUTREACH CENTER, INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 562 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 **Current Mailing Address: New Mailing Address:** 562 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 FEI Number: 20-8835118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAYER, DENNIS K 109 SOUTH 6TH ST., SUITE 200 FLAGLER BEACH, FL 32136 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAYER, DENNIS K Name: Name: 109 S 6TH ST, SUITE 200 Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: Title: Title: (X) Change () Addition () Delete D ELLIS, MICHAEL Name: HALL, JOHN Name: Address: 6023 WINDING RIDGE Address: 93 IVANHOE DRIVE ORMOND BEACH, FL 32176 US City-St-Zip: PORT ORANGE, FL 32138 City-St-Zip: Title: () Delete Title: (X) Change () Addition KURTZ, LINDSEY HERNDON, PAUL Name: Name: 835 HAMPTON CROSSING WAY 711 N. HALIFAX #102 Address: Address: City-St-Zip: ST AUGUSTINE, FL 32092 City-St-Zip: DAYTONA BEACH, FL 32118 US () Delete Title: Title: (X) Change () Addition WINECOFF, DANIEL WINECOFF, DANIEL Name: Name: 66 SEABREEZE DR 66 SEABREEZE DR Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176 US Title: () Delete Title: () Change (X) Addition MERRILL, SAM Name: Name: 4 MYSTIC LAKE WAY Address: Address: City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32174 US Title: () Delete Title: () Change (X) Addition TURNER, TONY Name: Name: Address: Address: 45 OAKMONT CIRCLE ORMOND BEACH, FL 32174 US City-St-Zip: 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: DENNIS K. BAYER, ESQ. D 03/20/2009