

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006891

FILED
Apr 30, 2008
Secretary of State

Entity Name: CHRISTIAN DISCIPLES OUTREACH VOLUNTEERS INC.

Current Principal Place of Business:

2123 HOOPLE STREET
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

PO BOX 60872
FORT MYERS, FL 33906

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:

LAING, RAYMOND R
2123 HOOPLE STREET
FORT MYERS, FL 33901 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: PDT () Delete
Name: LAING, RAYMOND R
Address: 2123 HOOPLE STREET
City-St-Zip: FORT MYERS, FL 33901

Title: VP (X) Delete
Name: EISENSTEIN, IRENE
Address: 12361 NOTTING HILL LANE #44
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete
Name: ACACIO, GRACE
Address: PO BOX 1281
City-St-Zip: FORT MYERS, FL 33902

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:

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: RAYMOND R. LAING

PDT

04/30/2008

Electronic Signature of Signing Officer or Director

Date