

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009696

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: DIESEL OUTREACH, INC.

**Current Principal Place of Business:**

2704 RIVKIN DRIVE  
KISSIMMEE, FL 34758

**New Principal Place of Business:**

**Current Mailing Address:**

2704 RIVKIN DRIVE  
KISSIMMEE, FL 34758

**New Mailing Address:**

FEI Number: 26-1249988      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRIEDMAN, MARC  
8634 NW 59TH PLACE  
PARKLAND, FL 33067      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 ( ) Delete  
Name: CARPENTER, JEROME  
Address: 2704 RIVKIN DRIVE  
City-St-Zip: KISSIMMEE, FL 34758

Title: VP ( ) Delete  
Name: LOMBILLO, DANIEL  
Address: 2704 RIVKIN DRIVE  
City-St-Zip: KISSIMMEE, FL 34758

Title: ST ( ) Delete  
Name: CARPENTER, GLADYS  
Address: 2704 RIVKIN DRIVE  
City-St-Zip: KISSIMMEE, FL 34758

Title: D ( ) Delete  
Name: LOMBILLO, REBECCA  
Address: 2704 RIVKIN DRIVE  
City-St-Zip: KISSIMMEE, FL 34758

**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:

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: JEROME CARPENTER

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date