

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001557

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: REDEEMED OF THE LORD OUTREACH INC.

**Current Principal Place of Business:**

WELLESLEY LAKE DR.  
304  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

WELLESLEY LAKE DR.  
304  
ORLANDO, FL 32818

**New Mailing Address:**

FEI Number: 35-2325352

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONES, VICTOR O SR.  
WELLESLEY LAKE DR.  
304  
ORLANDO, FL 32818 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: JONES, VICTOR O SR.  
Address: 8725 WELLESLEY LAKE DR APT #304  
City-St-Zip: ORLANDO, FL 32818

Title: VP ( ) Delete  
Name: JONES, TABETHA A  
Address: 8725 WELLESLEY LAKE DR APT #304  
City-St-Zip: ORLANDO, FL 32818

Title: S ( ) Delete  
Name: MONROE, PATTI  
Address: 5460 BAYBERRY HOMES ROAD  
City-St-Zip: ORLANDO, FL 32811

Title: T ( ) Delete  
Name: PUGLIESE, WENDY  
Address: 6013 FROGGATT STREET  
City-St-Zip: ORLANDO, FL 32835

**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: VICTOR O JONES SR

PRES

02/26/2009

Electronic Signature of Signing Officer or Director

Date