

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003253

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: DI IMANTI OUTREACH PROGRAM INC.

## Current Principal Place of Business:

6269 PALMA DEL MAR BLVD S  
F608  
ST PETERSBURG, FL 33715

## New Principal Place of Business:

## Current Mailing Address:

6269 PALMA DEL MAR BLVD S  
F608  
ST PETERSBURG, FL 33715

## New Mailing Address:

FEI Number: 26-2207666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

METZGAR, DONALD J  
6269 PALMA DEL MAR BLVD S  
F608  
ST PETERSBURG, FL 33715 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: WOOD, THOMAS J  
Address: 6269 PALMA DEL MAR BLVD S F608  
City-St-Zip: ST PETERSBURG, FL 33715

Title: VP ( ) Delete  
Name: METZGAR, DONALD J  
Address: 6269 PALMA DEL MAR BLVD S F608  
City-St-Zip: ST PETERSBURG, FL 33715

Title: S ( ) Delete  
Name: NEWNAM, MICHAEL  
Address: 1126 HIGHLAND STREET N  
City-St-Zip: ST PETERSBURG, FL 33701

Title: T ( ) Delete  
Name: CHAPMAN, HOLLIS B  
Address: 4000 24TH STREET N. LOT 1409  
City-St-Zip: ST PETERSBURG, FL 33714

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: METZGAR, NORMA  
Address: 4000 24TH STREET N LOT 12  
City-St-Zip: ST PETERSBURG, FL 33714

Title: T (X) Change ( ) Addition  
Name: CHAPMAN, HOLLIS B  
Address: 4000 24TH STREET N. LOT 12  
City-St-Zip: ST PETERSBURG, FL 33714

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: DONALD METZGAR

VP

04/15/2009

Electronic Signature of Signing Officer or Director

Date