2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005402

Entity Name: TRANSATLANTIC OUTREACH, INC.

FILED May 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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704 DROMEDARY DRIVE KISSIMMEE, FL 347594206

Current Mailing Address: New Mailing Address:

704 DROMEDARY DRIVE 706 BITTERN WAY

KISSIMMEE, FL 347594206 KISSIMMEE, FL 347594543

FEI Number: 42-1765154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TARDZER, CEPHAS S
704 DROMEDARY DRIVE
KISSIMMEE, FL 347594206 US
TARDZER, CEPHAS S
706 BITTERN WAY
KISSIMMEE, FL 347594543 US

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: 05/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name: TARDZER, CEPHAS S
Address: 704 DROMEDARY DRIVE
Address: 706 BITTERN WAY

City-St-Zip: KISSIMMEE, FL 347594206 City-St-Zip: KISSIMMEE, FL 347594543

Title: SD () Delete Title: () Change () Addition

 Name:
 WILLIAMS, PHILIP
 Name:

 Address:
 5145 SWEARNGAN ROAD
 Address:

 City-St-Zip:
 CHARLOTTE, NC 28216
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 NIEVES, EULISES
 Name:

 Address:
 6109 JAMES DUPREE LANE
 Address:

 City-St-Zip:
 ACWORTH, GA 30102
 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: CEPHAS S. TARDZER PRES 05/19/2009