2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2009
Secretary of State

DOCUMENT# N08000005446

Entity Name: UNITED EDUCATIONAL & WELFARE OUTREACH, INC.

Current Principal Place of Business:

780 BELLE GROVE LANE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

15580 MEADOW WOOD DRIVE
WELLINGTON, FL 33414

Current Mailing Address:

780 BELLE GROVE LANE
ROYAL PALM BEACH, FL 33411

New Mailing Address:

15580 MEADOW WOOD DRIVE
WELLINGTON, FL 33414

FEI Number: 61-1565319 **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:

HANNAH, PAULINE
15580 MEADOW WOOD DRIVE
WELLINGTON, FL 33414 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: DP ( ) Delete
Name: HANNAH CORNISH, EUTHENCIA P
Address: 780 BELLE GROVE LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: CORNISH, CLINTON
Address: 780 BELLE GROVE LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: HANNAH, MARK
Address: 780 BELLE GROVE LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: EUTHENCIA P HANNAH CORNISH D 09/01/2009

Electronic Signature of Signing Officer or Director — Date