

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27264

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** OUTREACH COMMUNITY CARE NETWORK, INC.

**Current Principal Place of Business:**

240 N FREDERICK AVENUE  
STE D  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9177  
DAYTONA BEACH, FL 32120 US

**New Mailing Address:**

**FEI Number:** 59-2897172      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

JENNINGS, LORETTA  
176 BRANDY HILLS DR.  
PORT ORANGE, FL 32129 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: PD  
Name: FLEET, MARK VAN  
Address: 2545 S ATLANTIC AVE  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: ED  
Name: JENNINGS, LORETTA  
Address: 176 BRANDY HILLS DR.  
City-St-Zip: PORT ORANGE, FL

Title: DS  
Name: MARUSA, EDWARD  
Address: 1942 TETON LANE  
City-St-Zip: DAYTONA BEACH, FL 32128

Title: VP  
Name: LAVIGNA, PHYLLIS  
Address: 116 SNOW GOOSE CT  
City-St-Zip: DAYTONA BEACH, FL 32119

Title: S  
Name: FRISBEE, GERALD  
Address: 3536 FOREST BRANCH DR APT C  
City-St-Zip: PORT ORANGE, FL 32129

I hereby 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 all other like empowered.

SIGNATURE: LORETTA JENNINGS

ED

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date