

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30187

FILED
Jan 05, 2012
Secretary of State

Entity Name: HOMELESS AND ORPHAN OUTREACH, INC.

Current Principal Place of Business:

400 KENT AVENUE
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1370
LAKE PLACID, FL 33862

New Mailing Address:

FEI Number: 59-2992538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITE, TROY W SR.
144 JAMISON AVE
LAKE PLACID, FL 33852 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: D
Name: RULE, BRICK
Address: 162 MORGAN PL
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: P
Name: WHITE, TROY SR
Address: 144 JAMISON AVE
City-St-Zip: LAKE PLACID, FL 33852

Title: D
Name: CAUSEY, JOHN
Address: 108 LAKE JUNE RD
City-St-Zip: LAKE PLACID, FL 33852

Title: T
Name: DURRANCE, KATHRYN
Address: 1125 PEACHTREE DR
City-St-Zip: LAKE PLACID, FL 33852

Title: S
Name: HOLT, VIRGINIA
Address: 100 REDWATER LANE
City-St-Zip: LAKE PLACID, FL 33852

Title: VP
Name: ESCOBAR, OMAR
Address: 1221 LAKE CLAY DRIVE
City-St-Zip: LAKE PLACID, FL 33852

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: TROY WHITE, SR.

P

01/05/2012

Electronic Signature of Signing Officer or Director

Date