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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

WALKER'S OUTREACH CENTER, INC.						
Principal Place of Business Mailing Address Marvin P. Jackson 205 W. BUFFALO AVE., STE. 204 TAMPA FL 33603 Mailing Address Marvin P. Jackson 205 W. BUFFALO AVE., STE. 204 TAMPA FL 33603						1811 SIAN 61811 1 34 1
A 0				3. Date Incorporated or Qualified 06/19/1989	3a. Date of La 05/25	st Report /1995
2. Principal Place of Business	2a. Mailing Address 26			4. FEI Number 59-2960677		Applied For Not Applicabl
Suite, Apt. #, etc.	Suite, Apt. #, etc.		······································	5. Certificate of Status Desired	1 1	75 Additional e Required
City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.	.00 May Be
Zip Country	Ζρ	Countr	/	This corporation has liability for		e 199 032
25 25 Name and Address of Cur	29	30		Florida Statutes	☐ Yes ☐ No	5. 199.032,
9. Name and Address of Cur	rent Registered Agent		T	10. Name and Address of New R	egistered Agent	
JACKSON, MARVIN P. (ESQUIRE)		81	Name			
205 W. MARTAIN LUTHER KING JR. B SUITE #204	BLVD.	82		dress (P.O. Box Number is Not Acceptab	le)	
TAMPA FL 33603		83				
Pursuant to the provisions of Sections 617.05 or registered agent, or both, in the State of Figure 1. Pursuant to the provisions of Sections 617.05 or Pursuant to the Pursuant Temple 2. Pursuant to the provisions of Sections 617.05 or Pursuant Temple 2. Pursuant to the provisions of Sections 617.05 or Pursuant Temple 2. Pursuant to the provisions of Sections 617.05 or Pursuant Temple 2. Pursuant to the provisions of Sections 617.05 or Pursuant Temple 2. Pursuant to the provisions of Sections 617.05 or Pursuant Temple 2. Pursuant Temple		84	1 1			Zip Code
or registered agent, or both, in the State of Fi familiar with, and accept the obligations of, Se IGNATURE		S		то от о	micrient as registere	eo agent. I am
Signature, typed or printed name of registered as OFFICERS A	gent and little if applicable (No AND DIRECTORS	OTE: Registered Ager	it signature require		DATE	
OFFICERS A	gent and title if applicable (N AND DIRECTORS DELETE	13.	nt signature require	ed when revisitating! ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	··
LE DOFFICERS A	AND DIRECTORS		nt signature require			
ME WALKER, S. DONZALEI REET ADDRESS 2609 MANOR OAK DR	AND DIRECTORS	13. 1.1 Title 1.2 NAME 1.3 STREET	ADORESS		CERS AND DIRECT	
ME WALKER, S. DONZALEI 2609 MANOR OAK DR VALRICO FL LE D	AND DIRECTORS	13. 1.1 TITLE 12 NAME	ADORESS		CERS AND DIRECT	Addition
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SIGNATURE: S. Donzalei Walker, Director

SIGNATURE: April 29, 96 1996

Signature and typed on Printed Name of Signing Organic and Director

Signature From:

Si