

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36380

FILED
Jan 07, 2004
Secretary of State

Entity Name: CHURCH AND COMMUNITY OUTREACH, INC.

Current Principal Place of Business:

1003 - 4TH STREET N
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 571
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-3365716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOY, FREDRIC C
555 7TH STREET SOUTH
SAFETY HARBOR, FL 34695

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: V () Delete
Name: LEHLBACH, BONNIE
Address: 306 HAMILTON AVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: V () Delete
Name: MITCHELL, JUDY
Address: 3918 SAYWOOD CT
City-St-Zip: PALM HARBOR, FL 34685

Title: S () Delete
Name: CARTER, MARGARET
Address: 2295 AMERICUS BLVD. E APT 41
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: DOWNING, LOIS MRS.
Address: 2461 RHODESIAN DR #33
City-St-Zip: CLEARWATER, FL 33763

Title: T () Delete
Name: MCCOY, FREDRIC
Address: 555 7TH STREET S
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: PEDIGO, S RUTH
Address: 124 BAYSHORE BLVD N
City-St-Zip: CLEARWATER, FL 33759

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:

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 for the exemption stated in Section 119.07(3)(i), 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: FREDRIC MCCOY

T

01/07/2004

Electronic Signature of Signing Officer or Director

Date