

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 08, 2003 8:00 am
Secretary of State

07-08-2003 90026 046 *****61.50

DOCUMENT # *1150412*

1. Entity Name

*Community Out Reach of Umatilla
Inc*



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

38906 Pearl St
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 781
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Umatilla FL 32784

City & State

Umatilla FL

4. FEI Number

Have applied for #

☒ Applied For

☐ Not Applicable

Zip

32784

Country

LAKE

Zip

32784

Country

LAKE

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name *Tyrone E. Rodwell*

Street Address (P.O. Box Number is Not Acceptable)

38906 Pearl St

City

Umatilla FL

FL

Zip Code

32784

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE *TYRONE E. RODWELL*
NAME *president*
STREET ADDRESS *Umatilla FL*
CITY-ST-ZIP *38906 Pearl St P.O. Box 781*

TITLE *Vice President*
NAME *Jesse Moore*
STREET ADDRESS *38345 chuch St*
CITY-ST-ZIP *Umatilla FL 32784*

TITLE *Director*
NAME *Margy Sengidron See*
STREET ADDRESS *17013 William Rd*
CITY-ST-ZIP *Umatilla FL 32784*

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered

SIGNATURE: *TYRONE E. RODWELL* *7/4/03* *352455 1683*

CR2E037B (12/02)