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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -3 PM 1:44

DOCUMENT # **N51370** (7)

1. Corporation Name
FRIENDS OUTREACH, INC.

Principal Place of Business	Mailing Address
408 1/2 BALTIMORE FT. MYERS FL 33905	P.O. BOX 50364 FT. MYERS FL 33905 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/16/1992	3a. Date of Last Report: 02/15/1994
4. FEI Number: 65-0439203	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No	

2. Principal Place of Business	2a. Mailing Address
21 359 New York Dr	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Fort Myers, FLA	28 City & State
24 Zip: 33905 25 Country: Lee	29 Zip 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BAILEY, CARL F. 408 1/2 BALTIMORE FT MYERS FL 33905	81 Name: Bailey, Carl F 82 Street Address (P.O. Box Number is Not Acceptable): 359 New York Dr 83 84 City: Ft Myers FL 85 Zip Code: 33905

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Carl F Bailey — Carl F Bailey — 1-16-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	D.P. ☑ Change ☐ Addition
NAME	BAILEY, CARL F.	1.2 NAME	Bailey, Carl F.
STREET ADDRESS	408 1/2 BALTIMORE	1.3 STREET ADDRESS	359 New York Dr.
CITY-ST-ZIP	FT MYERS FL 33905	1.4 CITY-ST-ZIP	Ft Myers, Fla 33905
TITLE	DV	2.1 TITLE	D.V. ☑ Change ☐ Addition
NAME	MORRIS, MYRTLE P.	2.2 NAME	Morris, Myrtle P.
STREET ADDRESS	3711 PATTY COURT	2.3 STREET ADDRESS	15141 Briar Ridge Cir.
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP	Ft Myers, Fla 33912
TITLE	DST	3.1 TITLE	DST ☑ Change ☐ Addition
NAME	BAILEY, LAVENIA C.	3.2 NAME	Bailey LaVenia C.
STREET ADDRESS	408 1/2 BALTIMORE	3.3 STREET ADDRESS	359 New York Dr.
CITY-ST-ZIP	FT MYERS FL 33905	3.4 CITY-ST-ZIP	Ft Myers, Fla 33905
TITLE	DAT	4.1 TITLE	DAT ☑ Change ☐ Addition
NAME	MORRIS, ROBERT L.	4.2 NAME	Morris, Robert L.
STREET ADDRESS	3711 PATTY CT	4.3 STREET ADDRESS	15141 Briar Ridge Cir
CITY-ST-ZIP	BONITA SPRINGS FL	4.4 CITY-ST-ZIP	Ft. Myers, Fla 33912
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or added to the report with an address.

SIGNATURE: Carl F Bailey — Carl F. Bailey, Pres — 1-16-95 — 813 694 7049
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

C099272