

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51370

FILED
Jul 16, 2005
Secretary of State

Entity Name: FRIENDS OUTREACH, INC.

Current Principal Place of Business:

9870 ORANGE RIVER BLVD
FORT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 50685
FORT MYERS, FL 33994 US

New Mailing Address:

FEI Number: 65-0439203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DOW, KENNETH R
12280 LAMONTIER RD
PUNTA GORDA, FL 33955 US

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: PDD () Delete
Name: BAILEY, CARL F.
Address: 303 E. BUELL DR
City-St-Zip: FORT MYERS, FL 33905 US

Title: DSTD () Delete
Name: BAILEY, JOHN H
Address: 336 W. BUELL DR
City-St-Zip: FORT MYERS, FL 33905 US

Title: DVPD () Delete
Name: SWAGGERTY, HAROLD
Address: 623 N SHERRY DR
City-St-Zip: ROSSVILLE, GA 30741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: PIPER, MYRTLE
Address: 138 STONEWOOD CT. NW
City-St-Zip: CLEVELAND, TN 37311 US

Title: STD (X) Change () Addition
Name: SWAGGERTY, HAROLD
Address: 623 N SHERRY DR
City-St-Zip: ROSSVILLE, GA 30741

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: CARL F BAILEY

PRES

07/16/2005

Electronic Signature of Signing Officer or Director

Date