FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N9400005013 (7)

YOUTH OUTREACH INTERNATIONAL, INC.

Principal Place of 250 11TH AVEI VERO BEACH	Mailing Address 250 11TH AVENUE VERO BEACH FL 32962			3. Date Incorporated or Qualified 3a. Date of Last Report 08/16/1995			
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
21 250		26			59-3271797	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Crty & State 3 VEYU	obency R.	City & State			Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees	
Z ₁₀	Country	Zφ	Count	ry	This corporation has liability for liab		. 199.032,
4 3396	25		30		Florida Statutes L 10. Name and Address of New R	Yes No	
	9. Name and Address of Curre	nt Registered Agent		11 Name	10. Hallie allo Acciess of Hea N	adiate en Adeist	
FILINGS INC.					ddress (P.Ö. Box Number is Not Acceptab	(e)	
3732 N.W. 16TH ST.					COLESS (.C. DOX 140 I DOX 10 100 I DOX 10 I DOX		
FT. LAUDERDALE FL 33311			8	13			
			ε	14 City		FL 85 Z	ip Code
familiar with	ad agent, or both, in the State of Floin, and accept the obligations of, Sec	ction 617.0503, Florida Statutes.			poard of directors. I hereby accept the appointment of directors. I hereby accept the appointment of directors.	DATE	J agent. I am
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	ORS IN 12
TITLE	D	DELETE	1.1 TITL	E		Change	☐ Addition
NAME	HARRIS, JACK		1.2 NAA	AE .			
STREET ADDRESS	250 11TH AVENUE		1.3 STR	EET ADDRESS			
CiTY-ST-ZIP	VERO BEACH FL 32962		1.4 CIT	/-ST-ZIP			
TIFLE	D	DELETE	2.1 TITU			☐ Change	Addition
NAME	OFFUTT, HARRY		2.2 NAN				
STREET ADDRESS	686 DATE PALM ROAD			EET ADDRESS			
CITY-ST-ZIP TITLE	VERO BEACH FL 32963	2963		Y-ST-ZIP .E		Change	Addition
NAME	WATKINS, SAMUEL		3.2 NA				
STREET ADDRESS	935 5TH PLACE		3 3 STR	EET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL 32962		3.4. Cf7	Y-ST-ZIP			
11TLE		DELETE	4 1 TITI	.E		Change	Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STF	REET ADDRESS			
CITY-ST-ZIF		Florier		Y - ST - ZIP		Change	Addition
TITLE		DELETE	5.1 TiT			☐ Change	
NAMÉ			5.2 NA				
STREET ADDRESS				HEET ADDRESS Y-St-Zip			
CITY - ST - ZIP TITLE		DELETE	61 111			☐ Change	Addition
NAME		_	6.2 NA			_	
STREET ADDRESS				REET ADDRESS			
C(TY-ST-7IP			6.4 CIT	Y-ST-ZIP			
	y certify that the information supplied the information indicated on this and I am an officer or director of the cor Block 12 or Block 13 if changes in	d with this filing is yoluntarily furnis mual report or supplemental annu- poration of the receiver or trustee or on an attachment with an addre	shed and o al report is empower ess.	does not qua strue and ac ed to execur	alify for the exemption stated in Section 119 courate and that my signature shall have the te this report as required by Chapter 617, Fi	.07(3)(k), Florida Stati same legal effect as lorida Statutes; and t	utes. I further if made under hat my name

SIGNATURE: _

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1-18-96

107-178-32

Daytima Phone #