## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

N9400005013 (7)

Principal Place of Business   Mailing Address   Substitute   Principal Place of Business   Substitute   Princ	YOUTH OUTREACH INTERNATIONAL, INC.									
VERO BEACH FL 39862  VERO BEACH FL 39862 9002  2. Principal Piace of Business 3. Date of Last Record O1/24/1998 3. Filt Name of Status Desired Status Desired Piace Requisited Piace Requisited Piace Piace On Piace Piac	Principal Piace	e of Business	Mailing Address	Malling Address				OHA OBIII O	OUR BUILD BENDE	
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S. Certificate of Status posted   Fee Required	21					59-32/1/9/			- ·- · · · · · · · · · · · · · · · · ·	
20 Country Zip Country	22		27			5. Certificate of Status Desired	,			
Zip Country 2tp Country 2tp Country 8. This expression has lability for intemptible for under s. 199 032   Fibrids Statutes   Ves   No    B, Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   11. Name and Address of New Registered Agent   12. Name and Address of New Registered Agent   13. Name and Address of New Registered Agent   14. Name   15. Name and Address of New Registered Agent   14. Name   15. Name and Address of New Registered Agent   14. Name   15. Name and Address of New Registered Agent   14. Name   15. Name   15	L *	9	<u>⊢</u> ¬ '				г			
Section   Statutes			· • • • • • • • • • • • • • • • • • • •							
Filings InC.   S72 N.W. 18TH ST.   ES   Zip Code	· ·			<b>⊢</b> '						
FILINGS INC. 3732 N.W. 18TH ST. FT. LAUDERDALE FL 33311  B4 City FL B5 Zip Code  11. Pursuant to the provisions of Socilons 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent, or both, in the State of Florida. Such change was submorred by the corporation's board of directors. I hereby accept the appointment as registered agent in similar with, and accept the obligations of, Socilon 617,0503, Florida Statutes.  SIGNATURE Signama. Invado or princip mane of agents and the Aspekable (MOTE Registered Agent signature agent and the Aspekable (MOTE Registered Agent signature)  12.				[00]	1					
373 N.W. 18TH ST. FT. LAUDERDALE FL 33311  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or familiar with, and accept the obligations of, Sociol of 17,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or familiar with, and accept the obligations of, Sociol of 17,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, in familiar with, and accept the obligations of, Sociol of 17,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DATE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. IN THE CANADISS OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TITLE  DELETE  14. TITLE  DELETE  14. TITLE  DELETE  15. TITLE  DELETE  22. TITLE  DELETE  33. TITLE  DELETE  34. TITLE  DELETE  34. TITLE  DELETE  34. TITLE  DELETE  35. TITLE  DELETE  44. TITLE  DELETE  45. TITLE  DELETE  55. TIT					81	Name				
FT. LAUDERDALE FL 33311    B3					82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
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14. I do hereby certify that the information supplied with this filling 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 supplied enter on the report is true and a accurate and that my signature shall have the same legal effect as if made under oath; that	CITY-ST-ZIP	/		6.4	cpv-s	1-ZIP				
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14. I do hereby certify that the information supplied with this filling does no information indicated on this annual report or supplementationary in a man officer or director of the corporation or the ceiver or trustee e

**FILED** 

Jun 30 1997 8:00am

Secretary of State