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

N96000001239 (0) DOCUMENT #

ALLEN OUTREACH AND COMMUNITY DEVELOPMENT CENTER, INC.

Principal Place of Business Mailing Address

FILED May 16 1997 8:00am Secretary of State

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2010 NORTH N TAMPA FL 3360	iebraska avenue 02		MO NORTH NEBRASKA AMPA FL 33602-2528	AVENUE					
						3. Date incorporated or Qualified 03/06/1996	3a. Date of Last	Report	
2. Principal P	al Place of Business 2a. Mailing Address 26		4. FEI Number		pplied For lot Applicable				
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional lequired		
City & State 23		28	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip 24	Country 25	29	Zip	Countr 30	У		Yes No	s. 199.032,	
	9. Name and Addres	of Current Regi	stered Agent		,	10. Name and Address of New Re			
	λ			81	Name FRA	NK S. STEWART, ESQU	IIRE		
	FORD, ALESIA			82	Street A	ddress (P.O. Box Number is Not Acceptab	ile)		
	MYER OAKS LAINE				356	0 N. 29th Street	······································		
IAMP	PL 33624	•		63	原为世	5.要以此时的YOU是记忆为	$\{1, \ell, 2\} \times \{\ell, \ell'\}$	graff j	
	<i>;</i>			84				Code	
11. Pursuant	to the provisions of Section	ns 617.0502 and (617 1508 Florida Statu	ites the abov	Tam re-named c	ornovation submits this statement for the n	FL 33	605	
office or r	egistered agent or both	in the State of Flor	ida. Such change was	authorized b	y the corpo	corporation submits this statement for the protection is board of directors. I hereby acception	of the appointment a	s registered	
	Tallinar walls acce	I the Condations					5.1.2		
SIGNATURE	Signature: Lyped or printed name of	registered agent and 40	r spilostie (NC	TE: Registered Ag	ent signature of	S. Stewart) 5 equired when reinstating)	/7/97 DATE		
12.	OF	ICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12	
TITLE		\sim .	DELETE	1.1 TITLE	l	P	☐ Change	Addition	
NAME	Alesia Seg			1.2 NAME		Bishop Frank C. Cur		[
STREET ADDRESS	4229 Water		ne	1.3 STREE	T ADDRESS	112 W. Adams Street		314	
CITY-ST-ZIP TITLE	Tampa, FL	33624	DELETE	1.4 CITY-	ST-ZIP	Jacksonville, FL : Trustee Board Member	32202		
NAME			C) Deterie	2.1 TITLE				Addition	
STREET ADDRESS			4	2.2 NAME		Rev. Harry L. Dawkins 912 - 3rd Avenue, North			
CITY-ST-ZIP					T ADDRESS				
TITLE			☐ DELETE	2.4 CITY- 3.1 TITLE	51-64	St. Petersburg, FL Trustee Board Membe	Change	Addition	
NAME				3.2 NAME	1	Mrs. Mozelle Fortu			
STREET ADDRESS				3.3 STREE	T ADDRESS	721 - 65th Avenue 1			
CITY - ST - ZIP				3.4. CITY-	ST-ZIP	Bradenton, FL 3420			
TITLE			☐ DELETE	4.1 TITLE		D	Change	Addition	
NAME				4. 2 NAME	.	Mr. Charles Long			
STREET ADDRESS				4.3 STREET	T ADDRESS	6718 Islander Lane			
CITY-ST-ZIP				4.4 CITY-	ST-ZIP	Tampa, FL 33615			
TITLE			DELETE	5.1 TITLE		Executive Director	Change	Addition	
NAME				5.2 NAME		Elizabeth P. Smith			
STREET ADDRESS					T ADDRESS	2205 N. Grady Avenu	ıe		
CITY-ST-ZIP			DELETE	5.4 CITY-5		Tampa, FL 33607	110	NO Address	
TITLE			FT NETELE	6.1 TITLE		R/A; Legal Advisor	Change	Addition	
NAME CIRCL ADDROCCO				6.2 NAME		Frank S. Stewart		15	
STREET ADDRESS					T ADDRESS	3560 N. 29th Street	1	15 5/16/97	
CITY-ST-ZIP				6.4 CITY-5	ST-ZIP	Tampa, FL 33605		2/16/11	

14. I do 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 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 on an attachment with an address.

ELIZABETH P. SMITHRE QUIRE