

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002671

FILED
May 06, 2008
Secretary of State

Entity Name: OUTREACH FOR YOUTH II, INC.

Current Principal Place of Business:

255 COACH ANDERS AVE
LAKE CITY, FL 32056 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1942
LAKE CITY, FL 32056 US

New Mailing Address:

FEI Number: 59-3262674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

JERNIGAN, WAYNE
1097 ANNIE MATTOX AVE.
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

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: CD () Delete
Name: JERNIGAN, WAYNE
Address: 1097 ANNIE MATTOX AVE.
City-St-Zip: LAKE CITY, FL 32055

Title: VCD () Delete
Name: WILSON, CEASARION
Address: RT 19 BOX 224
City-St-Zip: LAKE CITY, FL

Title: TD () Delete
Name: JERNIGAN, DONALD
Address: 707 1/2 FAIRVIEW STREET
City-St-Zip: LAKE CITY, FL 32055

Title: S () Delete
Name: JEFFERS, MCKINLEY
Address: 1050 E. LEON STREET
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WAYNE JERNIGAN

PRES

05/06/2008

Electronic Signature of Signing Officer or Director

Date