

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005989

FILED
Feb 10, 2011
Secretary of State

Entity Name: ON THE CUTTING EDGE OUTREACH PROGRAMS, INC.

Current Principal Place of Business:

5928 GILLIAM ROAD
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

5928 GILLIAM ROAD
ORLANDO, FL 32818

New Mailing Address:

5928 GILLIAM ROAD
ORLANDO, FL 32818 UN

FEI Number: 59-3408416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELLIGAR, A L DR
5928 GILLIAM ROAD
ORLANDO, FL 32818 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: D
Name: HELLIGAR, A L
Address: 7121 LAUREL HILLS RD.
City-St-Zip: ORLANDO, FL 32818 UN

Title: D
Name: HELLIGAR, DOROTHY
Address: 7121 LAUREL HILLS RD
City-St-Zip: ORLANDO, FL 32818 UN

Title: DT
Name: CHARLES, ANIKA
Address: 4420 OAKHAM CT
City-St-Zip: ORLANDO, FL 32818 UN

Title: D
Name: PHILLIP- MAGEE, MARLENE T
Address: 6901 HENNEPLN BLVD
City-St-Zip: ORLANDO, FL 32818 UN

Title: CD
Name: HELLIGAR, PATRICIA
Address: 7121 LAUREL HILL DRIVE
City-St-Zip: ORLANDO, FL 32818 UN

Title: D
Name: COOLEY, DARRYLL
Address: 2733 SPRINGFIELD DR
City-St-Zip: OCOEE, FL 34761 UN

I hereby 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 all other like empowered.

SIGNATURE: ACHILLE L HELLIGAR

P

02/10/2011

Electronic Signature of Signing Officer or Director

Date