

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002395

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** OAKTREE COMMUNITY OUTREACH, INCORPORATED

**Current Principal Place of Business:**

926-20TH ST EAST  
BRADENTON, FL 34208

**New Principal Place of Business:**

**Current Mailing Address:**

926-20TH ST EAST  
BRADENTON, FL 34208

**New Mailing Address:**

**FEI Number:** 59-3456424

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARNES, DAPHNEY S  
926- 20TH STREET EAST  
BRADENTON, FL 34208 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: P  
Name: BARNES, DAPHNEY  
Address: 926-20TH STREET EAST  
City-St-Zip: BRADENTON, FL 34208

Title: VPT  
Name: MACKEY, EBONY M  
Address: 926-20TH STREET EAST  
City-St-Zip: BRADENTON, FL 34208

Title: S  
Name: STEPHENS, PAULETTE  
Address: 809 30TH AVENUE EAST  
City-St-Zip: BRADENTON, FL 34208

Title: T  
Name: JACKSON, LINDA  
Address: 1835 SHARON ROAD  
City-St-Zip: YORK, SC 29745

Title: D  
Name: JACKSON, SAMUEL  
Address: 1835 SHARON ROAD  
City-St-Zip: YORK, SC 29745

Title: D  
Name: DEVEAUX, VIOLA  
Address: CARMICHAEL RD  
City-St-Zip: NASSAU N BAHAMAS, BA 00000

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: DAPHNEY S. BARNES

P

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date