

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002659

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** UNITED COMMUNITY OUTREACH, INC.

**Current Principal Place of Business:**

1411 EAST MAIN STREET, SUITE 5  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 491003  
LEESBURG, FL 34749

**New Mailing Address:**

**FEI Number:** 59-3447513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, ALONZO C  
7230 PLANTAIN DRIVE  
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: PD  
Name: BROWN, ALONZO C  
Address: 7230 PLANTAIN DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: VP  
Name: GREGG, MARY A MRS  
Address: 14210 PLANTATION PARK BLVD,#1215  
City-St-Zip: CHARLOTTE, NC 28277

Title: TD  
Name: WILLIAMS, DELPHINE S MRS  
Address: 104 NORTH FAULKNER AVENUE  
City-St-Zip: LEESBURG, FL 34748

Title: SD  
Name: ALGUILA, PATRIA C MISS  
Address: 8032 WINDY HILL WAY  
City-St-Zip: ORLANDO, FL 32818

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: ALONZO C. BROWN

PD

04/30/2011

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

\_\_\_\_\_  
Date