2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jul 21, 2005 8:00 am **Secretary of State** DOCUMENT # N97000003713 1. Entity Name 07-21-2005 90028 006 ****70.00 REACHING OUT TO OTHERS, INC. Principal Place of Business Mailing Address POST OFFICE BOX 3881 WEST PALM BEACH FL 33402 1030 SOUTH MANGONIA CIRCLE 50056645 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) 1st MOORE City & State City & State Applied For 4. FEI Number 65-0711154 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON, ELIZABETH M Street Address (P.O. Box Number is Not Acceptable) 1030 SOUTH MANGONIA CIRCLE WEST PALM BEACH FL 33401 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11 President TITLE ☐ Delete TITLE ☐ Change ☐ Addition JOHNSON, ELIZABETH M NAME . NAME 1030 S MANGONIA CIRCLE STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MAXWELL, LEKESHA NAME NAME 2909 OLD DIXIE HIGHWAY STREET ADDRESS STREET ADDRESS **RIVIERA BEACH FL 33402** CITY - ST - ZIP CITY-ST-ZIP T. Cynthia K. Johnson Change DAO 10:30 South Mainsonia W. Ralm Beach, FL 33401 TITLE TITLE Detete MCDONALD, SANDRA NAME NAME 1420 13TH STREET STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE THILE DAVIS, BETTY NAME NAME 1557 SILVER BEACH RD. STREET ADDRESS STREET ADDRESS RIVIERA BEACH FL 33404 CITY-ST-7/P CITY-ST-7IF ☐ Detete Addition THEF TITLE ☐ Change BUSH, EDITH NAME NAME 1444 8TH STREET STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP CITY-ST-ZIP Image Johnson ☐ Delete Addition TITLE TITLE JOHNSOM, OYNTHÍA K NAME NAME 1030 SOUTH MANGONIA CIRCLE STREET ADDRESS STREET ADDRESS WEST PAKM BEACH 33401 CITY-ST-ZIP CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if

Date Daytime Phone #

FILED

ATTACHMENT 50054645

July 14, 2005

To: Division of Corporation Re: Reaching Out to Offirs # N97000003713

> From: Elizabeth M. Johnson President.

Due to illness and Hurricanes I am very late w/this attachment. Encuding is my fee for Reaching Out. Please Let me Know what else I need to do- as I do not wish to disolved This organization.

For on line w/computer is not a part of my skills. Please Let us work thro mailing

Sincerly,