## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004154

FILED Apr 02, 2007 Secretary of State

Entity Name: UPPERROOM COMMUNITY OUTREACH CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 201 SW 38TH AVENUE 1809 NW 38TH AVENUE PLANTATION, FL 33312 LAUDERHILL, FL 33311 **Current Mailing Address: New Mailing Address:** P.O. BOX 9224 FORT LAUDERDALE, FL 33310 FEI Number: 65-0789133 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUTLER, JIMMIE L PASTOR 201 SW 38TH AVENUE PLANTATION, FL 33312 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BUTLER, JIMMIE L Name: Name: 5321 NW 14TH PLACE Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: DS ( ) Delete Title: () Change () Addition BUTLER, ALTHEA D Name: Name: Address: 5321 N.W. 14TH PL. Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition GRIFFIN, FRANKLIN J Name: Name: 1242 N.W. 15TH TERR. Address: Address: City-St-Zip: FT.LAUDERDALE, FL 33311 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: ROBINSON, WILLIE L Name: Address: 1900 N.W. 15TH AVE. Address: City-St-Zip: FT. LAUDERDALE, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition LIVINGSTON, RALPH Name: Name: 2590 N.W. 26TH AVE. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, JAMALA A Name: Name: Address: 5838 NW 21ST STREET Address: LAUDERHILL, FL 33313 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JIMMIE L. BUTLER DP 04/02/2007