

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N98 00000828**

1. Entity Name

Restoration & Reconciliation Outreach, Inc.

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90035 016 ****70.00

Principal Place of Business

Mailing Address

16186 NW 27th Avenue

16186 NW 27th Ave

Opa-Locka, Florida 33054

Opa-Locka, FL 33054

2. Principal Place of Business

16186 N.W. 27th Ave.

3. Mailing Address

16186 NW 27th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Opa-Locka, Florida

City & State

Opa-Locka, FL 33054

4. FEI Number

65-0792811

Applied For

Not Applicable

Zip

33054

Country

USA

Zip

33054

Country

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Linda G. Ross

2981 NW 157th Terrace

Opa-Locka, Florida 33054

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
Executive Director/President
Linda G. Ross
STREET ADDRESS
2981 NW 157th Terrace
CITY-ST-ZIP
Opa-Locka, FL 33054

TITLE NAME ☐ Delete
Dawn M. Bobo
STREET ADDRESS
2981 NW 157th Terrace
CITY-ST-ZIP
Opa-Locka, FL 33054

TITLE NAME ☐ Delete
Melvin L. Bratton
STREET ADDRESS
19468 NW 28th Place
CITY-ST-ZIP
Miami, FL 33056

TITLE NAME ☐ Delete
Anne Hodge
STREET ADDRESS
20104 NW 35th Avenue
CITY-ST-ZIP
Miami, FL 33056

TITLE NAME ☐ Delete
Cheryl Williams
STREET ADDRESS
8639 South Hampton
CITY-ST-ZIP
Miramar, FL 33025

TITLE NAME ☐ Delete
Lawrence Jordan
STREET ADDRESS
15961 NW 27th Avenue
CITY-ST-ZIP
Opa-Locka, FL 33054

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition
Sherry McClain
STREET ADDRESS
2930 NW 157th Street
CITY-ST-ZIP
Opa-Locka, FL 33054

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda G. Ross, Linda G. Ross

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 3, 2000 305-6210764

Date Daytime Phone #

CR2E037 (9/99)