2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004
Secretary of State

DOCUMENT# N98000001561

Entity Name: TEEN OUTREACH PROJECT OF THE WORLD, INC.

Current Principal Place of Business:

5620 LAKESIDE DRIVE
LUTZ, FL 33549

New Principal Place of Business:

5620 LAKESIDE DRIVE
LUTZ, FL 33558

Current Mailing Address:

PO BOX 340334
TAMPA, FL 33694

New Mailing Address:

FEI Number: 59-3561548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONWELL, LEWIS J
C/O RUDNICK & WOLFE
101 EAST KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602 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:	D	( ) Delete
Name:	LEATHERWOOD, SHERRIE	
Address:	14903 KNOTTY PINE PLACE	
City-St-Zip:	TAMPA, FL 33625	
Title:	D	( ) Delete
Name:	LEATHERWOOD, ROBERT	
Address:	14903 KNOTTY PINE PLACE	
City-St-Zip:	TAMPA, FL 33625	
Title:	D	( ) Delete
Name:	GILIO, JAMES	
Address:	6045 LAKESIDE DR	
City-St-Zip:	LUTZ, FL 33549	
Title:	D	( ) Delete
Name:	KING, ROBERT	
Address:	4337 HONEY VISTA CIRCLE	
City-St-Zip:	TAMPA, FL 33624	
Title:	D	( ) Delete
Name:	HARTSFIELD, MATTHEW	
Address:	16601 ROUND OAK DRIVE	
City-St-Zip:	TAMPA, FL 33618	
Title:	S	( ) Delete
Name:	HOWE, CATHERINE	
Address:	1911 CHERRY ROSE CIR	
City-St-Zip:	LUTZ, FL 33549	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT LEATHERWOOD PRES 04/21/2004
Electronic Signature of Signing Officer or Director — Date