2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# N98000006189

Entity Name: PINECREST COMMUNITY OUTREACH, INC.

Current Principal Place of Business:

3090 HOLIDAY SPRINGS BLVD.
SUITE 210
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

3090 HOLIDAY SPRINGS BLVD
STE # 210
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0876996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUNTE, JOSEPHINE M
3090 HOLIDAY SPRINGS BLVD
STE 210
MARGATE, FL 33063 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 ( ) Delete
Name: HUNTE, JOSEPHINE M
Address: 3090 HOLIDAY SPRINGS BLVD.
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete
Name: STINETTE, JUANTA
Address: 11 TROTTERS WAY
City-St-Zip: DALLAS, GA 30132

Title: D ( ) Delete
Name: LARKEN, GILMO
Address: 6565 BENEVA ST
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: STINNETT, JAUNTA
Address: 11 TROTTER WAY
City-St-Zip: DALLAS, GA 30132

Title: D (X) Change ( ) Addition
Name: LARKIN, GILMO
Address: 6565 GENEVA ST
City-St-Zip: LAKE WORTH, FL 33467

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: JOSEPHINE M HUNTE PD 04/30/2006

Electronic Signature of Signing Officer or Director — Date