

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # N98000007223

1. Entity Name
BARNABAS OUTREACH, INC.



Principal Place of Business
**316 EAST BLOOMINGDALE AVENUE
BRANDON, FL 33511**

Mailing Address
**316 EAST BLOOMINGDALE AVENUE
BRANDON, FL 33511**



01092008 No Chg-NP CR2E037 (4/06)

4. FEI Number
03-0535960

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DIAZ, MANUEL A JR
316 EAST BLOOMINGDALE AVENUE
BRANDON, FL 33511**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**U00000906880
05/05/08-80016-004 61.25**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCCULLAGH, JAMES P
STREET ADDRESS	11305 LEPRECHAUN DR.
CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	D
NAME	SCOTT, L. DAVID
STREET ADDRESS	942 SYMPHONY ISLES BLVD.
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	D
NAME	DIAZ, MANUEL A JR
STREET ADDRESS	2605 BUCKNELL DRIVE
CITY-ST-ZIP	VALRICO, FL 33594
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Manuel A. Diaz, Jr. **4-15-08** **(813) 621-7777, Ext. 208**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #