

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000890

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** WASHINGTON FAITH OUTREACH CENTER, INC.

**Current Principal Place of Business:**

2500 N.W. 14TH STREET  
FT. LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

2500 N.W. 14TH STREET  
FT. LAUDERDALE, FL 33311

**New Mailing Address:**

**FEI Number:** 65-0907998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WASHINGTON, ARETHA  
2500 N.W. 14TH STREET  
FT. LAUDERDALE, FL 33311 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: BURTON, MARY  
Address: 1736 NW 6TH TERR.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete  
Name: BURTON, BILLY  
Address: 1736 NW 6TH TERR.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: S ( ) Delete  
Name: PATRICK, LINDA  
Address: 1841 NW 26TH TERR.  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: TEMPLE, JESS  
Address: 1010 SW 9TH ST.  
City-St-Zip: HALLANDALE, FL 33009

Title: P ( ) Delete  
Name: WASHINGTON, ARETHA  
Address: 2500 NW STREET  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: CR ( ) Delete  
Name: CORBETT, DOROTHY  
Address: 2610 NW 20 CT.  
City-St-Zip: FT. LAUDERDALE, FL 33311

**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 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: ARETHA WASHINGTON

P

01/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date