2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N99000007190

Entity Name: REACH OUT ORPHANAGE, INC.

Current Principal Place of Business:

749 PALMERSTON PLACE
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

749 PALMERSTON PLACE
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-3621827 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RIVERA, LIZELLE
749 PALMERSTON PLACE
CASSELBERRY, FL 32707 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:	P	( ) Delete
Name:	QUINONES, JAYSON	
Address:	950 N CENTRAL AVE	
City-St-Zip:	OVIEDO, FL 32765	
Title:	O	( ) Delete
Name:	ROMERO, DIALIS	
Address:	749 PALMERSTON PLACE	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	VP	( ) Delete
Name:	ROMERO, DAVID	
Address:	749 PALMERSTON PLACE	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	S	( ) Delete
Name:	MARRERO, CARMIN	
Address:	4101 WINSTON CT, APT 204	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	T	( ) Delete
Name:	RIVERA, LIZELLE	
Address:	749 PALMERSTON PLACE	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	O	( ) Delete
Name:	CRUZ, LUIS	
Address:	105 HIGHLAND DRIVE	
City-St-Zip:	FERN PARK, FL 32708	

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:	O	(X) Change ( ) Addition
Name:	PADILLA, ELIZABETH	
Address:	1004 GEMSTONE COVE	
City-St-Zip:	SANFORD, FL 32771	

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: LIZELLE RIVERA T 05/04/2009

Electronic Signature of Signing Officer or Director — Date