2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161860

Title:

Name:

Address:

City-St-Zip:

SEC

JONES, JENNIFER

HOUSTON, TX 77258 US

P O BOX 580184

() Delete

Entity Name: A NEW BUSINESS OUTLOOK, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 119 S FRENCH AVE SANFORD, FL 32771 US **Current Mailing Address: New Mailing Address:** P O BOX 470068 LAKE MONROE, FL 32747 FEI Number: 26-0511978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DENNIS, KARIN N 210 S LÄUREL AVE SANFORD, FL 32771 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition DENNIS, KARIN Name: Name: P O BOX 470068 Address: Address: City-St-Zip: LAKE MONROE, FL 32747 US City-St-Zip: Title: CCO Title: () Delete () Change () Addition DENNIS, NORMAN Name: Name: P O BOX 470068 Address: Address: LAKE MONROE, FL 32747 US City-St-Zip: City-St-Zip: () Delete Title: Title: PRF () Change () Addition DENNIS, KARIN N Name: Name: P O BOX 470068 Address: Address: City-St-Zip: LAKE MONROE, FL 32747 US 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KARIN DENNIS VP 04/16/2009

(X) Change () Addition

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