FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000088828 (4)

GLOBAL OUTREACH, INC.

Principal Place of Business Mailing Address 1071 ENCOURTE GREEN 14410 RANEY'S LANE APOPKA FL 32712 ORLAND PARK IL 60462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3410072 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 \Box 28 Trust Fund Contribution Added to Fees Zip Country Country 7ip 8. This corporation owes or has paid the current year Intendible Personal Property Tax due June 30. Yes Yes 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name VISSCHER, JONATHAN E 2631-B N.W. 41ST STREET 62 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32606 B3** 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1.1 TITLE Addition VISSCHER, JONATHAN NAME 1.2 NAME 1500 NW 16TH AVE #279 STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL 32605** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 21 TITLE Change ☐ Addition TITLE VISSCHER, E. MARIE 2.2 NAME 1071 ENCOURTE GREEN STREET ADDRESS 2.3 STREET ADDRESS APOPKA FL 32712 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE DEERY, J. JEFFREY 3.2 NAME NAME 2615 VIA TUSCANY STREET ADDRESS 3.3 STREET ADDRESS **WINTER PARK FL 32789** CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE Addition TITLE 4.1 TITLE Change WEHMEIER, ELISE NAME 4. 2 NAME 14410 RANEYS LANE 4.3 STREET ADDRESS STREET ADDRESS **ORLAND PARK IL 60462** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 direction or the receiver of true that I am an officer or direction of the corporation or the receiver of true that I am an officer or direction of the corporation or the receiver of true that I am an officer or direction of the corporation or the receiver of true that I am an officer or direction of the corporation of th

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY - ST - ZIP

2/1/98 888-351-2711

FILED

Feb 12 1998 8:00am

Secretary of State