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**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000067247

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Mar 25, 1999 8:00 am **Secretary of State**

03-25-1999 90025 042 \*\*\*150.00

SENIOR OUTREACH SERVICES, INC. · Mailing Address Principal Place of Business 2536 COUNTRYSIDE BLVD. 2536 COUNTRYSIDE BLVD. CLEARWATER FL 33763 CLEARWATER FL 33763 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/29/1998 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable 26 21 Applied For Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 23 Zip Country Country This corporation owes the current year Intangible Zip □No Personal Property Tax. 25 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DOUDNA, HEATHER L Street Address (P.O. Box Number is Not Acceptable) 2536 COUNTRYSIDE BLVD. **CLEARWATER FL 33763** 83 Zip Code 84 City 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. Addition □ DELETE 1.1 TITLE ☐ Change TITLE P/D/S/T NAME BOESCH, GARY R 1.2 NAME BOESCH, GARY R. 1.3 STREET ADDRESS STREET ADDRESS 2536 COUNTRYSIDE BLVD. 2536 Countryside Blvd., 6th Floor **CLEARWATER FL 33763** 1.4 CITY+ST-ZIP Clearwater, FL 33763 CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition □ DELETE TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE ☐ Change ☐ Addition 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 supplemental 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 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 in Block 13 if changed, or given attackings with an address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP

Pres 3/18/99 (727)726-0726