

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002909

Entity Name: LEND AN EAR OUTREACH, INC.**Current Principal Place of Business:**905 BEACH BOULEVARD
SUITE B
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**14286 BEACH BOULEVARD
SUITE 19-115
JACKSONVILLE BEACH, FL 32250 US**FEI Number:** 45-4712577**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GILREATH, MELISSA T
115 S. THIRD STREET
JACKSONVILLE BEACH, FL 32250 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**Officer/Director Detail :**

Title	PD
Name	SHEEK, LISA
Address	78283 DUCKWOOD TRAIL
City-State-Zip:	YULEE FL 32097

Title	DIRECTOR
Name	ROUSSIN, SHERYL
Address	100 MILLS LANE
City-State-Zip:	JACKSONVILLE FL 32250

Title	SD
Name	GABRISZESKI, NANCY E
Address	4353 TIDEVIEW DRIVE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	TREASURER
Name	PABIAN, RONALD
Address	121 AZALEA POINT DRIVE, S
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	DIRECTOR
Name	YOUNG, DEBORAH
Address	5401 DIXIE LANDING DRIVE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DIRECTOR
Name	LITTLER, RICHARD
Address	111 MALLARD TRAIL
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	DIRECTOR
Name	WHITMAN, CLAUDIA
Address	525 5TH AVENUE, N.
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DIRECTOR
Name	GILREATH, MELISSA T
Address	101 PALMERA COURT
City-State-Zip:	PONTE VEDRA BEACH FL 32082

I hereby 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 all other like empowered.

SIGNATURE: NANCY E. GABRISZESKI**SECRETARY****03/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date