

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005607

**Entity Name:** HIGH STREET OUTREACH MINISTRIES INC**Current Principal Place of Business:**1015 EAST LINE ST.  
LEESBURG, FL 34748**Current Mailing Address:**31824 PARKDALE DRIVE  
LEESBURG, FL 34748 US**FEI Number: 90-1005558****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PARKER, SHIRLEY PASTOR  
31824 PARKDALE DRIVE  
LEESBURG, FL 34748 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	DP
Name	PARKER, SHIRLEY PASTOR
Address	31824 PARKDALE DRIVE
City-State-Zip:	LEESBURG FL 34748

Title	DVP
Name	JONES, DARLENE
Address	2125 NICOLOAS WAY
City-State-Zip:	LEESBURG FL 34748

Title	DT
Name	PARKER, TAMMY
Address	4583 COVE DRIVE
City-State-Zip:	LEESBURG FL 32159

Title	DS
Name	WALKER, JULIA
Address	2010 TRUITT STREET
City-State-Zip:	LEESBURG FL 34748

Title	DS
Name	KENNEDY, JACKIE
Address	4851 20TH STREET
City-State-Zip:	WILDWOOD FL 34785

*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: SHIRLEY PARKER****PRESIDENT****04/10/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date