Number: 59-3354817 Certificate of Status Desired:		ired: No	
ddress of Current Registered Agent:			
R W AFOX FL 32502 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.			
ROGER HIRTH			01/25/2016
Electronic Signature of Registered Agent			Date
ctor Detail :			
DP	Title	DV	
HIRTH, ROGER	Name	STEWART, JOSHUA	
18 NORTH PALAFOX	Address	18 NORTH PALAFOX	
PENSACOLA FL 32502	City-State-Zip:	PENSACOLA FL 32502	
DS			
SEXTON, GREG			
18 NORTH PALAFOX			
PENSACOLA FL 32502			
	Address of Current Registered Agent: W AFOX L 32502 US Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits this statement for the purpose of changing its registered Tentity submits the purpose of changing its registered T	Address of Current Registered Agent: W AFOX L 32502 US Tentity submits this statement for the purpose of changing its registered office or regis E <u>ROGER HIRTH</u> Electronic Signature of Registered Agent Ctor Detail : DP Title HIRTH, ROGER Name 18 NORTH PALAFOX Address PENSACOLA FL 32502 City-State-Zip: DS SEXTON, GREG 18 NORTH PALAFOX	Address of Current Registered Agent:   RW   AFOX   12 32502 US   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice   It entity submits this statement for the purpose of changing its registered agent   It entity submits this statement for the purpose of changing its registered agent   It put the put

# 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005990

Entity Name: HARVEST OUTREACH, INC.

## **Current Principal Place of Business:**

**18 NORTH PALAFOX** PENSACOLA, FL 32502

## **Current Mailing Address:**

P.O. BOX 17667 PENSACOLA, FL 32522 US

#### E0 22E 4047 N. FE . .

## Na

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: JOSHUA STEWART

DV

Electronic Signature of Signing Officer/Director Detail

FILED Jan 25, 2016 **Secretary of State** CC0250603565