2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006452

Entity Name: NEW OUTLOOK II, INC.

Current Principal Place of Business:

1241 BLUEHILL DRIVE NORTH JACKSONVILLE. FL 32218

Current Mailing Address:

P.O. BOX 19249

JACKSONVILLE. FL 32245-9549 US

FEI Number: 59-3421096 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SOMMERS, ROBERT A 10550 DEERWOOD PARK BOULEVARD SUITE 600 JACKSONVILLE, FL 32256 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: ROBERT SOMMERS 01/26/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title OFFICER, CHAIRMAN Title TREASURER, DIRECTOR

 Name
 OWEN, GEORGE
 Name
 BASS, ROBIN

 Address
 P.O. BOX 19249
 Address
 P.O. BOX 19249

City-State-Zip: JACKSONVILLE FL 32245-9549 City-State-Zip: JACKSONVILLE FL 32245-9549

 Title
 CEO, DIRECTOR
 Title
 DIRECTOR

 Name
 SOMMERS, ROBERT
 Name
 BREW, RICHARD

NameSOMMERS, ROBERTNameBREW, RICHARDAddress10550 DEERWOOD PARKAddressP.O. BOX 19249

BOULEVARD, SUITE 600

City-State-Zip: JACKSONVILLE FL 32245-9549

Title DIRECTOR

Name GREGORY, E.C.

Name CUTRIGHT, KELLI

Address P.O. BOX 19249

Address P.O. BOX 19249 City-State-Zip: JACKSONVILLE FL 32245-9549

City-State-Zip: JACKSONVILLE FL 32245-9549

Title DIRECTOR

Name JARRETT, MARY Address P.O. BOX 19249

Address P.O. BOX 19249 City-State-Zip: JACKSONVILLE FL 32245-9549

City-State-Zip: JACKSONVILLE FL 32245-9549

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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: ROBERT SOMMERS PRESIDENT/CEO 01/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 26, 2023

Secretary of State

6581899879CC

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name PASCOE, BEVERLY Name SMITH, A. RUSSELL

Address P.O. BOX 19249 Address P.O. BOX 19249

City-State-Zip: JACKSONVILLE FL 32245-9549 City-State-Zip: JACKSONVILLE FL 32245-9549