

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001647

**Entity Name:** OUTCOMES OPERATING, INC.

**Current Principal Place of Business:**

5900 LAKE ELLENOR DRIVE  
STE 600  
ORLANDO, FL 32809

**Current Mailing Address:**

5900 LAKE ELLENOR DRIVE  
STE 600  
ORLANDO, FL 32809 US

**FEI Number:** 47-5022839

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            CEO  
Name            DIETERMAN, JUDE  
Address        5900 LAKE ELLENOR DRIVE  
                  STE 600  
City-State-Zip: ORLANDO FL 32809

Title            DIRECTOR  
Name            DIETERMAN, JUDE  
Address        5900 LAKE ELLENOR DRIVE  
                  STE 600  
City-State-Zip: ORLANDO FL 32809

Title            CLO/SECRETARY  
Name            SCHAEFER, JOHN  
Address        5900 LAKE ELLENOR DRIVE  
                  STE 600  
City-State-Zip: ORLANDO FL 32809

Title            CFO/TREASURER  
Name            FARRELL, ALFRED  
Address        5900 LAKE ELLENOR DRIVE  
                  STE 600  
City-State-Zip: ORLANDO FL 32809

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUDE DIETERMAN

CEO

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Date