

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36919

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** PROJECT RESPONSE, INC.

**Current Principal Place of Business:**

745 S APOLLO BLVD  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

**Current Mailing Address:**

745 S APOLLO BLVD  
MELBOURNE, FL 32901 US

**New Mailing Address:**

**FEI Number:** 59-3036563      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CIVEY, JEFFRY  
1666 GLENCOVE AVENUE NW  
PALM BAY, FL 32907 US

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

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

**OFFICERS AND DIRECTORS:**

Title: T  
Name: MCCAMPBELL, ELAINE  
Address: 300 NW PEACOCK BOULEVARD  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D  
Name: DISALVIO, HARRY  
Address: 641 BRADDOCK ST  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP  
Name: PIERCE, DANIEL  
Address: 113 CABLE LANE  
City-St-Zip: PALM BAY, FL 32905

Title: D  
Name: WELTON, LAURIE  
Address: 116 QUEEN CHRISTINA COURT  
City-St-Zip: FORT PIERCE, FL 34949

Title: P  
Name: CIVEY, JEFFRY  
Address: 1666 GLENCOVE AVENUE NW  
City-St-Zip: PALM BAY, FL 32907

Title: D  
Name: KAPPES, KEVIN  
Address: 441 FRONDA AVENUE SW  
City-St-Zip: PALM BAY, FL 32908

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: JEFFRY CIVEY

P

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date