#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006802

Entity Name: PROJECT: RETURN TO WORK INC.

FILED Feb 09, 2019 Secretary of State 6357318939CC

# **Current Principal Place of Business:**

C/O CHARLOTTE COUNTY JUSTICE CENTER 350 EAST MARION AVE OFFICE 3130 PUNTA GORDA, FL 33950

# **Current Mailing Address:**

P.O. BOX 19381 BOULDER, CO 80308 US

FEI Number: 94-3317507 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

BRAZELL, ROB C/O CHARLOTTE COUNTY JUSTICE CENTER 350 EAST MARION AVE OFFICE 3130 PUNTA GORDA FL 33950 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 TD

Name BRAZELL, ROB

Address C/O CHARLOTTE COUNTY JUSTICE

**CENTER** 

350 EAST MARION AVE OFFICE 3130

City-State-Zip: PUNTA GORDA FL 33950

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: ROB BRAZELL PRESIDENT

Electronic Signature of Signing Officer/Director Detail

02/09/2019 Date