

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006931

FILED
Jan 30, 2019
Secretary of State
1265166695CC

Entity Name: PTF 3 RESTORATION PROJECT, INC.

Current Principal Place of Business:

910 BISCAYNE BLVD.
DELAND, FL 32724

Current Mailing Address:

910 BISCAYNE BLVD.
DELAND, FL 32724

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWEIZER, ALFRED
910 BISCAYNE BLVD.
DELAND, FL 32724 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 P
Name SCHWEIZER, ALFRED
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title VP
Name ROWLEY, DON
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title S
Name LOWENSTEIN, PETE
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title T
Name WEITER, FRANK
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title DIRECTOR
Name PEGRAM, EL
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title DIRECTOR
Name BRADEEN, HAROLD
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

Title DIRECTOR
Name SCHENDEL, MIKE
Address 910 BISCAYNE BLVD.
City-State-Zip: DELAND FL 32724

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: ALFRED SCHWEIZER

PRESIDENT

01/30/2019

Electronic Signature of Signing Officer/Director Detail

Date