2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003498

Entity Name: TRASH MOUNTAIN PROJECT, INC.

Current Principal Place of Business:

4110 NW 62ND ST

STE B TOPEKA, KS 66618

Current Mailing Address:

4110 NW 62ND ST

STE B

TOPEKA, KS 66618 US

FEI Number: 26-4775012 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAIRCHILD, BENJAMIN M 1720 S. FLORIDA AVENUE STE 1

LAKELAND, FL 33803 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: BENJAMIN M FAIRCHILD

02/23/2021

FILED Feb 23, 2021

Secretary of State

7691806021CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title SECRETARY

NameDURBIN, BRETTNameDURBIN, JAELLE CAddressTRASH MOUNTAIN PROJECTAddress12211 SW 57TH ST

4110 NW 62ND ST STE B City-State-Zip: TOPEKA KS 66610

City-State-Zip: TOPEKA KS 66618

Title DIRECTOR Title VICE-CHAIRMAN

Name VANDER HART, KENNETH W
Name NICHOLS, PHILLIP B

Address 321 S MOLLY MITCHELL DR Address 4416 SW PINEBROOK LN City-State-Zip: TOPEKA KS 66610

City-State-Zip: AIRWAY HEIGHTS WA 99001

Title DIRECTOR

Name HUGHES, TIMO

Name HUGHES, TIMOTHY
Name TINDELL, MIKE
Address 8248 SW 77TH ST

Name HUGHES, TIMOTHY
Address 5400 SW HUNTOON ST.

City-State-Zip: TOPEKA KS 66604

Title CHAIRMAN
Title DIRECTOR

 Name
 RUELLE, MARK

 Name
 RUELLE, MARK

 Name
 Address

 2737 SE RATNER RD

City-State-Zip: TOPEKA KS 66610

Continues on page 2

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: BRETT DURBIN EXECUTIVE DIRECTOR 02/23/2021

Officer/Director Detail Continued:

Title TREASURER Title DIRECTOR

Name WILSON, CINDY Name CLAYTON, JONES

Address 7903 SW 28TH ST Address 7439 SW KING FOREST CT

City-State-Zip: TOPEKA KS 66614 City-State-Zip: TOPEKA KS 66610