

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10893

Entity Name: PROJECT RETURN, INC.

Current Principal Place of Business:

304 W WATERS AVE
TAMPA, FL 33604

Current Mailing Address:

304 W WATERS AVE
TAMPA, FL 33604

FEI Number: 59-2612753

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MITCHELS, NATALIE
304 WEST WATERS AVE
TAMPA, FL 33604 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 STD
Name ADAMS, DEBORAH
Address 5419 HAMMOCK VIEW LANE
City-State-Zip: APOLLO BEACH FL 33572

Title D
Name PRESTON, MARIE
Address 1057 S. CLEARVIEW AVENUE
City-State-Zip: TAMPA FL 33629

Title MD
Name MITCHELS, NATALIE
Address 303 WEST WATERS AVE
City-State-Zip: TAMPA FL 33604

Title PD
Name KURTZMAN, ROBIN
Address 8218 RIVER BOAT DRIVE
City-State-Zip: TAMPA FL 33637

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: NATALIE Y. MITCHELS

EXECUTIVE DIRECTOR

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date