2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2015
Secretary of State
CC5498594764

DOCUMENT# N11000009314

Entity Name: THE PICNIC PROJECT, INC.

Current Principal Place of Business:

13 SANTIAGO ROAD
DEBARY, FL 32713

Current Mailing Address:

13 SANTIAGO ROAD
DEBARY, FL 32713 US

FEI Number: 45-3624109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEPHERD, JOANN
3390 BUFFAM PLACE
CASSELBERRY, FL 32707 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	D
Name	SHEPHERD, JOANN
Address	3390 BUFFAM PLACE
City-State-Zip:	CASSELBERRY FL 32707

Title	D
Name	WILLIAMS, SENNET
Address	2806 N. THORPE AVE.
City-State-Zip:	ORANGE CITY FL 32763

Title	D
Name	MCKENDRICK, BROOKE
Address	13 SANTIAGO ROAD
City-State-Zip:	DEBARY FL 32713

Title	D
Name	THOMPSON, SCOTT
Address	1510 LEGACY CLUB DRIVE
City-State-Zip:	MAITLAND FL 32751

Title	D
Name	BOZEMAN, RYAN
Address	401 MAGNOLIA ST. #2
City-State-Zip:	SANFORD FL 32771

Title	D
Name	MCGARRY, CHRISTOPHER
Address	410 E 14 ST #201
City-State-Zip:	SANFORD FL 32771

Title	D
Name	SEBASTIANO, LISA
Address	933 BERESFORD WAY
City-State-Zip:	LAKE MARY FL 32746

Title	D
Name	CHARLTON, DAVID
Address	170 OAK VIEW CIRCLE
City-State-Zip:	LAKE MARY FL 32746

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: BROOKE MCKENDRICK D 01/21/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	ORTIZ, TONY
Address	901 WATT CIRCLE
City-State-Zip:	DELTONA FL 32738

Title	D
Name	CHRISTENSEN, DANIEL
Address	211 LAKEWOOD DRIVE
City-State-Zip:	DEBARY FL 32713