2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004741

Entity Name: WOUNDED WARRIOR PROJECT, INC.

Current Principal Place of Business:

4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256

Current Mailing Address:

C/O CHARLES H. NAVE, PC 333 CHURCH AVE, SW ROANOKE, VA 24016 50

FEI Number: 20-2370934

Name and Address of Current Registered Agent:

NARDIZZI, STEVEN 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256 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

Officer/Director Detail :

Omeen,Diree			
Title	ED	Title	PD
Name	NARDIZZI, STEVEN	Name	HALFAKER, DAWN
Address	4899 BELFORT ROAD, SUITE 300	Address	4899 BELFORT ROAD, SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	VPD	Title	DED
Name	PRINCIPI, ANTHONY	Name	GIORDANO, ALBION
Address	4899 BELFORT ROAD, SUITE 300	Address	4899 BELFORT ROAD, SUITE 300
		City-State-Zip:	JACKSONVILLE FL 32256
City-State-Zip:	JACKSONVILLE FL 32256	ony orace zip.	
Title	SD	Title	D
Name	ORDIERNO, ANTHONY	Name	ABELL, CHARLES S
Address	4899 BELFORT ROAD, SUITE 300	Address	4899 BELFORT ROAD, SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
		Title	DIRECTOR
Title	DIRECTOR		
Name	BATTAGLIA, CHARLES	Name	CAMPBELL, ROGER
Address	4899 BELFORT ROAD SUITE 300	Address	4899 BELFORT ROAD SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256

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.

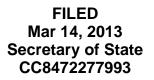
SIGNATURE: STEVEN NARDIZZI

EXECUTIVE DIRECTOR 03/14/2013

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date



Officer/Director Detail Continued :

City-State-Zip: JACKSONVILLE FL 32256

Title	DIRECTOR	Title	DIRECTOR
Name	CONSTANTINE, JUSTIN	Name	DELANEY, KEVIN
Address	4899 BELFORT ROAD SUITE 300	Address	4899 BELFORT ROAD SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR	Title	DIRECTOR
Name	DRACH, RON	Name	LOOSEN, JOHN
Address	4899 BELFORT ROAD SUITE 300	Address	4899 BELFORT ROAD SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR	Title	DIRECTOR
Name	MANSFIELD, GORDON	Name	MCMICHAEL, GUY H
Address	4899 BELFORT ROAD SUITE 300	Address	4899 BELFORT ROAD SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	DIRECTOR	Title	DIRECTOR
1100			
Name	STOCKWELL, MELISSA	Name	VAN CLEAVE, ROBB
	STOCKWELL, MELISSA 4899 BELFORT ROAD SUITE 300	Name Address	VAN CLEAVE, ROBB 4899 BELFORT ROAD SUITE 300
Name	4899 BELFORT ROAD		4899 BELFORT ROAD
Name Address	4899 BELFORT ROAD SUITE 300	Address	4899 BELFORT ROAD SUITE 300
Name Address City-State-Zip:	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256	Address City-State-Zip:	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256
Name Address City-State-Zip: Title	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CFO	Address City-State-Zip: Title	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CHIEF PROGRAM OFFICER
Name Address City-State-Zip: Title Name	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CFO BURGESS, RONALD W 4899 BELFORT ROAD	Address City-State-Zip: Title Name	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CHIEF PROGRAM OFFICER CHWAT, JEREMY 4899 BELFORT ROAD
Name Address City-State-Zip: Title Name Address	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CFO BURGESS, RONALD W 4899 BELFORT ROAD SUITE 300	Address City-State-Zip: Title Name Address	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CHIEF PROGRAM OFFICER CHWAT, JEREMY 4899 BELFORT ROAD SUITE 300
Name Address City-State-Zip: Title Name Address City-State-Zip:	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CFO BURGESS, RONALD W 4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256	Address City-State-Zip: Title Name Address	4899 BELFORT ROAD SUITE 300 JACKSONVILLE FL 32256 CHIEF PROGRAM OFFICER CHWAT, JEREMY 4899 BELFORT ROAD SUITE 300