## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 728047 (2)					
PROJECT HOME, INC.					
	,				
Principal Place of Business Mailing Address					
3220-13TH ST EAST		P.O. BOX 1196			
BRADENTON FL 34208 US		BRADENTON FL 34206-1196 US			
•				<ol> <li>Date Incorporated or Qualified 11/16/1974</li> </ol>	3a. Date of Last Report 09/06/1996
<del> </del> 1		2a. Mailing Address		4. FEI Number	Applied For
21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Suite, Apt. #, etc.		23-7329928	Not Applicable
22 27		$\vdash$		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Constant	28	1 0 1	Trust Fund Contribution	Added to Fees
Zip 24	Country	Ζίρ <b>29</b>	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,
24	9. Name and Address of Current		30	10. Name and Address of New Reg	
			81 Name		
SHEA, ROSEMARY 3220-13TH ST EAST			82 Street A	ddress (P.O. Box Number is Not Acceptable	le)
			83	· · ·	
BRADENTON FL 34208			63		
			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE OFFICERS AND DIRECTORS		18: Registered Agent signature re	gent signature required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	DELETE	1.1 TITLE		Change Addition
NAME	LYNN, JANET L		1.2 NAME		
STREET ADDRESS	1611-12TH AVENUE NORTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34205	T DELETE	1.4 CITY-ST-ZIP		
TITLE NAME	BENEDICT, DAVID D	☐ DELETE	2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	1013-40TH AVE EAST		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34208		2. 4 CITY-ST-ZIP		
TITLE	PD	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SHEA, ROSEMARY		3.2 NAME		
STREET ADDRESS	BRADELITAN EL AJANA		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BRADENTON FL 34208	☐ DELETE	3.4. C/TY-ST-Z/P 4.1 TITLE	···········	Change Addition
NAME			4.2 NAME		CT cuantic CT vitorion
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELET <b>E</b>	5 4 CHY-ST-ZIP		Change Address
TITLE NAME		☐ nereig	6.1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET AODRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
		·			·····

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if exampled, or on an attachment with an address.

**FILED** 

Sep 22 1997 8:00am

Secretary of State