

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F92000000940

1. Entity Name

THE PRASAD PROJECT, INC.

Principal Place of Business

465 BRICKMAN RD
HURLEYVILLE NY 12747
US

Mailing Address

465 BRICKMAN RD
HURLEYVILLE NY 12747
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

14-1751000 1751086

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PAPINO, ROBERTA
3285 MACDONALD STREET
MIAMI FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete
NAME MCCracken, ED
STREET ADDRESS 262 MT CLIFF RD
CITY-ST-ZIP HURLEYVILLE NY 12747

4/D ☒ Change ☐ Addition
NAME Chairman/Director
STREET ADDRESS mcracken, Ed
CITY-ST-ZIP 50 Forest Road 76
Angel Fire, NM 87710

D ☐ Delete
NAME DACQmine, FREDERIC
STREET ADDRESS 14 RICE MAYET
CITY-ST-ZIP PARIS F 75006 FR

VC/D ☒ Change ☐ Addition
NAME Vice Chairman/Director
STREET ADDRESS Dacqmine, Frederic
CITY-ST-ZIP 14 Rue Mayet
F-Paris 75006, FRANCE

PD ☐ Delete
NAME MORSE, J. THOMAS
STREET ADDRESS DOOHICKY LANE
CITY-ST-ZIP SOUTH FALLSBURG NY 12779

D ☒ Change ☐ Addition
NAME Director
STREET ADDRESS Morse, J. Thomas
CITY-ST-ZIP Dohicky Lane
South Fallsburg, NY 12779

D ☐ Delete
NAME BRENT, RONALD J
STREET ADDRESS 36 SOUTH WOODARD
CITY-ST-ZIP ENGLEWOOD NJ 07631

D ☒ Change ☐ Addition
NAME Director
STREET ADDRESS Brent, Ronald J.
CITY-ST-ZIP 14 Tremper Ave.
Phoenixia, NY 12464

VPD ☐ Delete
NAME ECKLES, TACLYNE
STREET ADDRESS 1364 BEDFORD ROAD
CITY-ST-ZIP PLEASANTVILLE NY 10570

VP/D ☒ Change ☐ Addition
NAME VP/D
STREET ADDRESS Eckles, Taclyne
CITY-ST-ZIP 1364 Bedford Rd
Pleasantville NY 10570

S ☐ Delete
NAME WYCKOFF, KATHERINE
STREET ADDRESS 243 CORRALITOS RD
CITY-ST-ZIP WATERSONVILLE CA 95076

S ☒ Change ☐ Addition
NAME S
STREET ADDRESS Wyckoff, Katherine
CITY-ST-ZIP 343 Corralitos Rd.
Watsonville, CA 95076

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Katherine Wyckoff (Katherine Wyckoff) 4/18/01 1831722-5071



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)