

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002303

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** OPERATION P.R.I.D.E., INC.

**Current Principal Place of Business:**

624 DECATUR AVENUE  
BROOKSVILLE, FL 346013236 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 10189  
BROOKSVILLE, FL 346030189 US

**New Mailing Address:**

**FEI Number:** 59-3711614

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MYERS, GREG K  
624 DECATUR AVENUE  
BROOKSVILLE, FL 346013236 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** JORDAN III, EARLE H  
**Address:** 624 DECATUR AVENUE  
**City-St-Zip:** BROOKSVILLE, FL 346013236 US

**Title:** STD  
**Name:** MYERS, GREG K  
**Address:** 624 DECATUR AVENUE  
**City-St-Zip:** BROOKSVILLE, FL 34601

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:** GREG K. MYERS

STD

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date