2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006128

Entity Name: THE M.O.R.G.A.N. PROJECT, INC.

FILED Jan 10, 2011 Secretary of State

Current Principal Place of Business:

3830 S. HIGHWAY A-1-A

SUITE C-4, #153

MELBOURNE BEACH, FL 32951

Current Mailing Address:

3830 S. HIGHWAY A-1-A

SUITE C-4, #153

MELBOURNE BEACH, FL 32951

MELBOURNE BEACH, FL 32951 US

FEI Number: 59-3744749

MALFARA, ROBERT C

SUITE C-4, #153

3830 S. HIGHWAY A-1-A

FEI Number Applied For ()

FEI Number Not Applicable ()

SUITE 4, #153

SUITE 4, #153

() Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MALFARA, ROBERT C 3830 S. HIGHWAY A-1-A

SUITE 4, #153

MELBOÚRNE BEACH, FL 32951 US

New Principal Place of Business:

MELBOÚRNE BEACH, FL 32951

MELBOÜRNE BEACH, FL 32951

3830 S. HIGHWAY A-1-A

New Mailing Address:

3830 S. HIGHWAY A-1-A

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

01/10/2011

OFFICERS AND DIRECTORS:

Title: PD

Name: MALFARA, ROBERT Address: 4947 IDLE HOUR CT

City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD

Name: JEAVONS, SHARON
Address: 4934 BUTTONWOOD
City-St-Zip: MELBOURNE, FL 32940

Title: TD

Name: MALFARA, KRISTEN Address: 4947 IDLE HOUR CT

City-St-Zip: MELBOURNE BEACH, FL 32951

Title: SD

 Name:
 JEAVONS, SCOTT

 Address:
 4934 BUTTONWOOD

 City-St-Zip:
 MELBOURNE, FL 32940

Title: VD

 Name:
 ROMANO, LEE

 Address:
 119 GRIMES STREET

 City-St-Zip:
 COCOA, FL 32922

Title: BD

Name: KELSCH, SHAWNA Address: 2598 PUTNAM

City-St-Zip: INDIALANTIC, FL 32903-1

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: KRISTEN MALFARA TD 01/10/2011