2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000006563

1. Entity Name



FILED Apr 21, 2005 8:00 am Secretary of State

04-21-2005 90219 049 ****70.00

| PROJEC | I PADDLE O | DISSET, INCO | RPORATED | | Table 1 | | | | | |
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| 3019 8 ST N 3 | | | Mailing Address 3019 8 ST N ST PETERSBURG, FL 337 | 704-2010 | | | | | | |
| | | | | | | | | | | |
| 2. Principal Place of Business 3. Mailing Address | | | 3. Mailing Address | | | | TTES MAY BETTA FERTI GI | OTH BOTH COMM I | ITTEL BANKE BANKE I | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 04162005 | Chg-NP | CR2E0 | 37 (10/03) | |
| City & State | | | City & State | | | EC 2000400 | | | oplied For ot Applicable | |
| Zip | Zip Country | | Zip Country | | | 5. Certificate of Status Desired S8.75 Addition Fee Required | | | | |
| | 6. Name and | Address of Current Re | egistered Agent | | | 7. Name and A | Address of New | Registered | Agent | |
| HOFSTADER, SUSAN | | | | · - · Name | • • • • • • | | - | | | |
| 3019 8 ST N ST PETERSBURG, FL 33704-2010 | | | Street A | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | City | · | , | | Fl | Zip Coc | le |
| The above named entity submits this statement for the purpose of changing its registered. | | | | | r registere | ed agent, or both | , in the State of F | | familiar with, | , and accept |
| the obligat | tions of registered | agent. | | | | | | | | |
| SIGNATURE | Signature typed or pro- | ted name of registered agent an | d thin if anninghin (NOTE: 8 | legistered Agent signer | | when reinstature) | | DATE | | |
| | agames, special pro- | | | | | | | | | |
| | | | | | | _ | | | | |
| | Filing Fee is Due by May | · · | 9. Election Camp Trust Fund Cor | • | | \$5.00 May Be Added to Fees | | | k payable t | |
| 10. | Due by May | · · | Trust Fund Col | ntribution. | A | | Fic | orida Depa | IRECTORS IN | N 10 |
| TITLE 331.1 | Due by May | 1, 2005 OFFICERS AND DIRE | Trust Fund Cor | ntribution. | V D | Added to Fees DDITIONS/CHAI | NGES TO OFFIC | ERS AND D | rtment of S | tate |
| | Due by May | 1, 2005 | Trust Fund Col | TITLE NAME STREET ADDRESS | V D OCA | Added to Fees DDITIONS/CHAI MPO/ER POLNISE | NGES TO OFFICE | DERS AND D | IRECTORS II | N 10 |
| TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP | PD HOFSTADER, 3019 8 ST N ST PETERSB | 1, 2005 OFFICERS AND DIRE | Trust Fund Cor | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V D OCA 1500 TAR | Added to Fees DDITIONS/CHAI | NGES TO OFFICE | DERS AND D | IRECTORS IN Change | N 10 Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | PD HOFSTADER, 3019 8 ST N ST PETERSBI | 1, 2005 OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 | Trust Fund Cor | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | V D OCA 1500 TAR | Added to Fees DDITIONS/CHAI MPO, ER POLUSE POLUSE POLUSE ROW SP | NGES TO OFFICE ANIE ETTIA AVI PRINGS | DERS AND D | IRECTORS II | N 10 |
| TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP | PD HOFSTADER, 3019 8 ST N ST PETERSB | 1, 2005 OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 | Trust Fund Cor | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V D OCA 1500 TAR D BRB 920 | Added to Fees DDITIONS/CHAI MPO, ER POLUSE POLUSE POLUSE WINGTON WORLE | NGES TO OFFICE ANIE ETTIA AVE ERINGS INTAY ENT ST | EFL 3 | IRECTORS IN Change | N 10 Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD HOFSTADER, 3019 8 ST N ST PETERSB! D HENTER, TEL 8335 37 AVE I ST PETERSB! | 1, 2005 OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 | Trust Fund Cor | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | V D CXA 1500 TAR D BRE 920 TAN | Added to Fees DDITIONS/CHAI MPO, ER POLUSE POLUSE POLUSE ROW SP | NGES TO OFFICE ANIE ETTIA AVE ERINGS INTAY ENT ST | DERS AND D | IRECTORS IN Change | N 10 Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | PD HOFSTADER, 3019 8 ST N ST PETERSB! D HENTER, TEL 8335 37 AVE I ST PETERSB! | OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 N URG, FL 33710 | Trust Fund Cor | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | V D OXA 1500 TAR DRB 920 TAN | Added to Fees DDITIONS/CHAI MPO, ER POLUSE POLUSE POLUSE WINGTON WORLE | NGES TO OFFICE ANIE ETTIA AVE PRINGS TAY ENT ST 1 33 | EFL 3 | IRECTORS IN Change | N 10 Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD HOFSTADER, 3019 8 ST N ST PETERSBI D HENTER, TEE 8335 37 AVE 1 ST PETERSBI D MANN, WILLIA | OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 N URG, FL 33710 | Trust Fund Cor CTORS Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP | VD OCA 1500 TAR DRE 920 TAN D CAL | Added to Feed DDITIONS/CHAI MPO, ER POINSE ROW SP WINGTON WORIE MPA F VO, MIKI | MGES TO OFFICE ANIE ETTIA AVI ERINGS JAY ENT ST L 33 | ERS AND D | IRECTORS IN Change | N 10 Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | PD HOFSTADER, 3019 8 ST N ST PETERSBI D HENTER, TEE 8335 37 AVE I ST PETERSBI D MANN, WILLIA UNIVERSITY | 1, 2005 OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 N URG, FL 33710 AM PH.D | Trust Fund Cor CTORS Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | VO OCA 1500 TAR BRB 920 TAN D CAL 490 | Added to Fees DDITIONS/CHAI MPO, ER POLUSE POLUSE POLUSE WINGTON WORLE | MGES TO OFFICE ANIE ETTIA AVI ERINGS JAY ENT ST L 33 | ERS AND D | IRECTORS IN Change | N 10 Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME | PD HOFSTADER, 3019 8 ST N ST PETERSBI D HENTER, TEC 8335 37 AVE I ST PETERSBI D MANN, WILLIA UNIVERSITY GAINESVILLE VD O'CAMPO, ER | OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 N URG, FL 33710 AM PH.D OF FLA P.O. BOX 1 E, FL 326100164 | Trust Fund Cor CCTORS Delete Delete Delete Corrected Delete Delete Corrected Delete Delete Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | V D OXA 1500 TAR D GRE 920 TAN D CAL 490 ORI | Added to Feed DDITIONS/CHAI MPO, ER POINSE POINSE POINSE POINSTON WORTE NPA F NO, MIKE I ALAVI ANDO FRITE RI | MGES TO OFFICE NIE TTIA AVE RINGS TAY ENT ST L 33 ENT ST L 33 CK CK | ERS AND D E FL 3 610 | IRECTORS IN Change Change Change | N 10 Addition Addition |
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| TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME | PD HOFSTADER, 3019 8 ST N ST PETERSB! D HENTER, TEL 8335 37 AVE I ST PETERSB! D MANN, WILLIA UNIVERSITY GAINESVILLE VD O'CAMPO, ER %-EREEDOM SAINT-PETER TSD HOFSTADER, | OFFICERS AND DIRE CHRISTIAN D URG, FL 337042010 URG, FL 33710 AM PH.D OF FLA P.O. BOX 1 E, FL 326100164 RNIE LSCIENTIFIC, 11800 RSBURG, FL 33716 | Trust Fund Cor | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | VD CXA 1900 TAR 920 TAN CAL 490 DR 522 SAN | Added to Feed DDITIONS/CHAIN MPO, ER POINSE | NIE STINGS ATAY ST 33 CK #10 CK #10 | ERS AND D E FL 3 610 2837 | IRECTORS IN Change Change Change Change | N 10 Addition Addition Addition |
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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:

Sugar Hollette BROWNTHER AND TYPED OR PRINTED HAMES OF BROWNS OFFICER OR DIFFECTO

4/18/2005

727-896-6393

Daytime Phone #