

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007856

FILED
Jan 07, 2008
Secretary of State

Entity Name: PROJECT CHANCE, INC.

Current Principal Place of Business:

95512 ARBOR LANE
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

95512 ARBOR LANE
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 56-2403830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SZWEDZINSKI, B.J.
1662 ARBOR LANE
FERNANDINA BEACH, FL 32034 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: CSD () Delete
Name: SZWEDZINSKI, B.J.
Address: 95512 ARBOR LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: PEREZ, ERIKA
Address: 1662 ARBOR LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: KUTUDIS-KEYEN, ANN
Address: 1662 ARBOR LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S () Delete
Name: CRAWFORD, MARY
Address: PMB 392 11250-15 OLD ST. AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32258

Title: T () Delete
Name: WECHSLER, RHONDA
Address: 189 GREENCREST DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BJ SZWEDZINSKI

MS

01/07/2008

Electronic Signature of Signing Officer or Director

Date