

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008478

FILED
Aug 31, 2005
Secretary of State

Entity Name: PROJECT MERCY, INC.

Current Principal Place of Business:

P.O. BOX 175
GRAHAM, FL 32042

New Principal Place of Business:

6008 NW 29TH ST
GAINESVILLE, FL 32653

Current Mailing Address:

P.O. BOX 175
GRAHAM, FL 32042

New Mailing Address:

6008 NW 29TH ST
GAINESVILLE, FL 32653

FEI Number: 20-0302222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NEWELL, BILLY G
11844 SW COUNTY RD 18
GRAHAM, FL 32042 US

Name and Address of New Registered Agent:

NEWELL, BILLY G
6008 NW 29TH ST
GAINESVILLE, FL 32653 US

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: _____

08/31/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NEWELL, BILLY G
Address: P.O. BOX 175
City-St-Zip: GRAHAM, FL 32042

Title: D () Delete
Name: DUNNAGAN, MICHAEL
Address: 1702 BECKER DR
City-St-Zip: KILLEEN, TX 76543

Title: D () Delete
Name: FLOWERS, DONNIE
Address: 267 EDGAR ROAD
City-St-Zip: LAKE PARK, GA 31636

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SMITH, CRYSTAL C
Address: 84 SILVERADO DR
City-St-Zip: DOUGLAS, GA 31535

Title: D (X) Change () Addition
Name: FLOWERS, DONNIE
Address: 1419 GRADY REVELL RD
City-St-Zip: WAUCHULA, FL 33873

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BILLY G NEWELL

PRES

08/31/2005

Electronic Signature of Signing Officer or Director

Date