2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006
Secretary of State

DOCUMENT# N03119

Entity Name: VOLUNTEER LAWYERS' PROJECT, INC.

Current Principal Place of Business:

3301 E TAMIAMI TRAIL
BUILDING L
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

3301 E TAMIAMI TR
BUILDING L
NAPLES, FL 34112 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CURATOLO, COURTNEY
3301 E TAMIAMI TRAIL
BUILDING L
NAPLES, FL 34112 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 ( ) Delete
Name: PRICE, KELLEY
Address: 27200 RIVERVIEW COURT BLVD, STE 309
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD ( ) Delete
Name: RAWSON, JEAN
Address: 400 FIFTH AVENUE SOUTH, STE 300
City-St-Zip: NAPLES, FL 34102

Title: TD ( ) Delete
Name: HAZZARD, WILLIAM
Address: 2640 GOLDEN GATE PKWY, STE 304
City-St-Zip: NAPLES, FL 34105

Title: SD ( ) Delete
Name: PASSIDOMO, KATHLEEN
Address: 2640 GOLDEN GATE PKWY, STE 305
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JEAN, RAWSON
Address: 400 FIFTH AVENUE SOUTH, STE 300
City-St-Zip: NAPLES, FL 34102

Title: VPD (X) Change ( ) Addition
Name: WILLIAM, HAZZARD
Address: 2640 GOLDEN GATE PKWY, STE 304
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Change ( ) Addition
Name: KATHLEEN, PASSIDOMO
Address: 2390 TAMIAMI TRAIL N, STE 204
City-St-Zip: NAPLES, FL 34103

Title: SD (X) Change ( ) Addition
Name: JANEICE, MARTIN
Address: 2670 AIRPORT ROAD S
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the 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: JEAN RAWSON PD 01/10/2006

Electronic Signature of Signing Officer or Director — Date