## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004018

Entity Name: POWER OVER PANIC FOUNDATION, INC.

Jul 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

484 LANTERNBACK ISLAND DR 15350 AMBERLY DRIVE SATELLITE BEACH, FL 32937

UNIT #4621

TAMPA, FL 33647

**Current Mailing Address:** New Mailing Address:

484 LANTERNBACK ISLAND DR 15350 AMBERLY DRIVE

SATELLITE BEACH, FL 32937 UNIT #4621

TAMPA, FL 33647

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

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: Name and Address of New Registered Agent:

VERDEROSA, AMEIGH VERDEROSA, AMEIGH 484 LANTERNBACK ISLAND DR 15350 AMBERLY DRIVE SATELLITE BEACH, FL 32937 UNIT #4621

TAMPA, FL 33647 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: 07/21/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

VERDEROSA, AMEIGH VERDEROSA, AMEIGH Name: Name:

Address: 484 LANTERNBACK ISLAND DR Address: 15350 AMBERLY DRIVE - UNIT #4621

City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: (X) Change ( ) Addition

VERDEROSA, ALBERT Name: Name: VERDEROSA, ALBERT

Address: 484 LANTERNBACK ISLAND DR Address: 15350 AMBERLY DRIVE - UNIT #4621

City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: SEC (X) Change ( ) Addition VERDEROSA, MARY Name: VERDEROSA, MARY Name:

484 LANTERNBACK ISLAND DR 15350 AMBERLY DRIVE - UNIT #4621 Address: Address:

City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: TAMPA, FL 33647

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: AMEIGH VERDEROSA **PRES** 07/21/2005

Electronic Signature of Signing Officer or Director

Date