

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

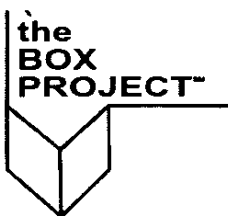
8/12/2005-90004-005-\$61.25-\$61.25

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000009127					
1. Entity Name THE BOX PROJECT, INC.					
Principal Place of Business 100 BUSINESS CENTER DRIVE SUITE 26 ORMOND BEACH, FL 32174			Mailing Address 100 BUSINESS CENTER DRIVE SUITE 26 ORMOND BEACH, FL 32174		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
City & State		City & State		4. FEI Number 06-0854618	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent PATNEAUDE, SUSAN 238 GALA CIRCLE DAYTONA BEACH, FL 32124					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and its address. (p018: Registered Agent signature required when amending) Date					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		55.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	NAME				
NAME	PATNEAUDE, SUSAN EXEC.				
STREET ADDRESS	100 BUSINESS CENTER DRIVE SUITE 26				
CITY-ST-ZIP	ORMOND BEACH, FL 32174				
TITLE	NAME				
NAME	See Attached List				
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	NAME				
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CITY-ST-ZIP					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	NAME				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(f), 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 the empowered.					
SIGNATURE: Anne Blake Anne Blake Treasurer 7/23/05 (313)885-5020					



THE BOX PROJECT BOARD OF DIRECTORS 2005

TERM ENDING 2005

EVA SCHOLFIELD 1ST term

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ANNE BLAKE 1ST term

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ADELL MOORE 1ST term

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RAYMOND USES THE KNIFE 1ST term

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EXECUTIVE DIRECTOR

SUSAN PATNEAUDE

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TERM ENDING 2007

BERNADETTE HENDERSON 1ST term

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KATHLEEN MAHONEY 1ST term

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BOARD OFFICERS 2005

Cindy Shearer - President
Sue Taylor - Vice President
Anne Blake - Treasurer
Annette Burns - Secretary
Eva Scholfield - At Large

100 Business Center Drive, Ste. 26 ~ Ormond Beach, FL 32174 ~ Phone: 386.677.8094 ~ Fax: 386.677.8617 ~ Web: www.boxproject.org

Our Mission: Encouraging families and individuals living in rural poverty in America to become self-sufficient and overcome the cycle of poverty by offering them friendship, education, and material aid.