

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009127

Entity Name: THE BOX PROJECT, INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

525 SOUTH RIDGEWOOD AVENUE
SUITE B
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2266
DAYTONA BEACH, FL 32115

New Mailing Address:

FEI Number: 06-0854618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATNEAUDE, SUSAN
236 GALA CIRCLE
DAYTONA BEACH, FL 32124 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: ED () Delete
Name: PATNEAUDE, SUSAN
Address: 100 BUSINESS CENTER DRIVE, SUITE 26
City-St-Zip: ORMOND BEACH, FL 32174

Title: P () Delete
Name: SANTA, RACHEL
Address: 64 MEADOW SWEET TRAIL
City-St-Zip: SAUNDERSTOWN, RI 02874

Title: V () Delete
Name: O'GRADY, MARY CLARE
Address: 1 CITIZENS PLAZA DRIVE, SUITE 1000
City-St-Zip: PROVIDENCE, RI 02903

Title: T () Delete
Name: ARROWSMITH, DEBRA
Address: 8842 ROCK DOVE ROAD
City-St-Zip: LEWIS CENTER, OH 43035

Title: S (X) Delete
Name: SAGAL, JOYCE
Address: 142 OXBOW DRIVE
City-St-Zip: WILLIMANTIC, CT 06226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EXEC (X) Change () Addition
Name: PATNEAUDE, SUSAN
Address: 236 GALA CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124

Title: PRES (X) Change () Addition
Name: SANTA, RACHEL
Address: 64 MEADOW SWEET TRAIL
City-St-Zip: SAUNDERSTOWN, RI 02874

Title: V P (X) Change () Addition
Name: O'GRADY, MARY CLARE
Address: 1 CITIZENS PLAZA DRIVE, SUITE 1000
City-St-Zip: PROVIDENCE, RI 02903

Title: SECT (X) Change () Addition
Name: MALDONADO, AMY
Address: 2609 GABRIELLE WOODS PLACE
City-St-Zip: OVIEDO, FL 32765

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: RACHEL SANTA

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date