

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003319

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: AGATHON PROJECT, INC.

**Current Principal Place of Business:**

6049 ARTHUR AVE  
NEW PORT RICHEY, FL 34653

**New Principal Place of Business:**

**Current Mailing Address:**

6049 ARTHUR AVE  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

FEI Number: 20-2448282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PITTMAN, EDWARD  
6049 ARTHUR AVE  
NEW PORT RICHEY, FL 34653 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: D ( ) Delete  
Name: PITTMAN, EDWARD  
Address: 6049 ARTHUR AVE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Delete  
Name: FORD, NICOLE  
Address: 2733 CEDAR GLADE RD  
City-St-Zip: NAPERVILLE, IL 60564

Title: D ( ) Delete  
Name: BARTH, COLIN  
Address: 6 WORKMAN PL  
City-St-Zip: PHILADELPHIA, PA 19147

Title: D (X) Delete  
Name: WESTON, DANNY  
Address: 82 PENRYHN RD  
City-St-Zip: HUNTERS BAR SHEFFIELD, XX

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: EDWARD PITTMAN

D

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date