

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003725

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: PROTECT OUR WORLD, INC.

## Current Principal Place of Business:

4086 TERN STREET  
SARASOTA, FL 34232

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 15853  
SARASOTA, FL 342771853

## New Mailing Address:

FEI Number: 30-0315608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASON, ANN  
2290 CLEMATIS STREET  
SARASOTA, FL 34239 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: GROSS, CHERYL  
Address: 4086 TERN ST  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete  
Name: ROSENTHAL, ED  
Address: 1523 EDGER PLACE  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: HOTZ, ASHLEY  
Address: PO BOX 1302  
City-St-Zip: MONTICELLO, FL 32345

Title: D ( ) Delete  
Name: MASON, ANN  
Address: 2290 CLEMATIS ST  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: SIMMONS, RICHARD  
Address: PO BOX 1362  
City-St-Zip: MONTICELLO, FL 32345

Title: D ( ) Delete  
Name: GABRIEL, SALLY  
Address: 417 BAYSIDE LANE  
City-St-Zip: NOKOMIS, FL 34275

## 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:

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: CHERYL GROSS

MS

04/28/2008

Electronic Signature of Signing Officer or Director

Date