

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006301

FILED  
Mar 23, 2010  
Secretary of State

**Entity Name:** PROJECT R.O.C.K. SOUTH, INC.

**Current Principal Place of Business:**

862 SW GLENVIEW CT.  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

862 SW GLENVIEW CT.  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

**FEI Number:** 20-3076543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HILLIMAN, PHILBERT  
6289 W. SUNRISE BLVD  
SUITE 250  
SUNRISE, FL 33313 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:** DPT  
**Name:** BLAKE, CORNELIUS  
**Address:** 862 SW GLENVIEW CT.  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** D  
**Name:** TOWNSEND, QUEEN S  
**Address:** 5335 NW NASSAU LN.  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

**Title:** D  
**Name:** REDIC, BARBARA  
**Address:** 349 SW EASTPORT CIRCLE  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** D  
**Name:** CRAIG, MARY  
**Address:** 1500 A NW AMHERST DRIVE  
**City-St-Zip:** PORT ST. LUCIE, FL 34986

**Title:** D  
**Name:** AMSTED, WILLIAM  
**Address:** 34440 SW PORPOISE CIRCLE  
**City-St-Zip:** STUART, FL 34997

**Title:** D  
**Name:** MILLER, OTELIA F  
**Address:** P.O. BOX 215  
**City-St-Zip:** PORT SALERNO, FL 34992

I hereby 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 all other like empowered.

**SIGNATURE:** CORNELIUS BLAKE

DPT

03/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date