

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007967

FILED
May 01, 2012
Secretary of State

Entity Name: MILESTONE PROJECTS INCORPORATED

Current Principal Place of Business:

927 S. GOLDWYN AVE
211
ORLANDO, FL 32805

New Principal Place of Business:

927 S. GOLDWYN AVE
211
ORLANDO, FL 32805 UN

Current Mailing Address:

P.O. BOX 781833
ORLANDO, FL 32878

New Mailing Address:

FEI Number: 90-0400621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKMON, JOLONDA
927 S. GOLDWYN AVE
211
ORLANDO, FL 32805 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: PD
Name: BLACKMON, JOLONDA
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

Title: V
Name: DUMAS, DIONNE
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

Title: T
Name: WELLS, RICHELLE E
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

Title: A
Name: GREIR, PEONCA S
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

Title: S
Name: WELLS, JEANESE Y
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

Title: A
Name: BROWN, BEATRICE R
Address: P.O. BOX 781833
City-St-Zip: ORLANDO, FL 32878

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: JOLONDA BLACKMON

PD

05/01/2012

Electronic Signature of Signing Officer or Director

Date