


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (ARY)

FILED
Jun 11, 2008 8:00 am
Secretary of State

06-11-2008 90001 026 ****70.00

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|--|--|--|--|--|--|
| DOCUMENT # N06000010982 1. Entity Name PROJECTS OF PASCO, INC. | | | |  | |
| Principal Place of Business 34304 LODGE ROAD ZEPHYRHILLS FL 33543 | | | Mailing Address 34304 LODGE ROAD ZEPHYRHILLS FL 33543 | | |
| 2. Principal Place of Business - No P.O. Box # 34304 Lodge Dr Suite, Apt. #, etc. | | 3. Mailing Address Same Suite, Apt. #, etc. | | | |
| City & State Zephyrhills FL 33543 Zip 33543 | | City & State Same Zip 33543 | | 4. FEI Number 56-2611135 | |
| Country Pasco | | Country Same | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent STEVENS, R. JAMES 35332 WHISPERING PINES DR ZEPHYRHILLS FL 33541 | | | 7. Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>James R. Stevens</i></u> DATE <u>4-24-08</u> <small>Signature of person or printed name of registered agent must be typed. (NOTE: Registered Agent signature must be used when recording)</small> | | | | | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | Make Check Payable to Florida Department of State | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DP FULK, ANNA D 34304 LODGE RD ZEPHYRHILLS FL 33543 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DV HILTON, SUSE E 11215 PELICAN DR DADE CITY FL 33525 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DS TORRES, MARISTZA PO BOX 2431 ZEPHYRHILLS FL 33539 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DT BURTON, WANDA S 11211 RED BIRD DR DADE CITY FL 33525 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DT BURTON, WANDA S 11211 RED BIRD DR DADE CITY FL 33525 | <input type="checkbox"/> Delete | | | |
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| TITLE NAME STREET ADDRESS CITY- ST- ZIP | DT BURTON, WANDA S 11211 RED BIRD DR DADE CITY FL 33525 | <input type="checkbox"/> Delete | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <u><i>Anna D Fulk</i></u> <u><i>Anna Fulk</i></u> 813 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |
| DATE: <u>4-25-08</u> 598-2938 <small>DATE</small> | | | | | |



ATTACHMENT

40108225

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2008

PROJECTS OF PASCO, INC.
34304 LODGE DRIVE
ZEPHYRHILLS, FL 33543

Subject: **PROJECTS OF PASCO, INC.**

Reference Number: **N06000010982**

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the enclosed nonprofit annual report/uniform business report is \$61.25. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/sk

ANNUAL REPORTS SECTION

only thing I
found is that I
forgot to enclose
the check for \$70.00

Did not see anything
on App that need to be
corrected

Anna Tulk 6-9-08