2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

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Entity Name: PROJECT FAMILY T.I.E.S., INCORPORATED

Current Principal Place of Business:

35517 WELBY COURT
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

35517 WELBY COURT
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OROPALLO, KATHLEEN A PH.D.
35517 WELBY COURT
ZEPHYRHILLS, FL 33541 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: P
Name: OROPALLO, KATHLEEN PH.D.
Address: 35517 WELBY COURT
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP
Name: LAMBERT, LYNN M PSY.D.
Address: 2290 BELLONA LANE #311
City-St-Zip: ROCHESTER, NY 14610

Title: VP
Name: GRAHAM, M T
Address: 8415 BELLONA LANE #311
City-St-Zip: TOWSON, MD 21204

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: KATHLEEN OROPALLO P 05/01/2012

Electronic Signature of Signing Officer or Director — Date