

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009817

FILED
Feb 03, 2009
Secretary of State

Entity Name: PROJECT AFTERMATH TEMPORARY HOUSING SOLUTIONS CORPORATION

Current Principal Place of Business:

221 NORTH HOGAN STREET, SUITE 322
JACKSONVILLE, FL 32202

New Principal Place of Business:

221 NORTH HOGAN STREET
SUITE 322
JACKSONVILLE, FL 32202

Current Mailing Address:

221 NORTH HOGAN STREET, SUITE 322
JACKSONVILLE, FL 32202

New Mailing Address:

221 NORTH HOGAN STREET
SUITE 322
JACKSONVILLE, FL 32202

FEI Number: 26-3746308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD., SUITE A-100
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
SUITE A-100
TAMPA, FL 33612 US

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: _____

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: LEE, ANTHONY T
Address: 221 NORTH HOGAN STREET, SUITE 322
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANTHONY T. LEE

CEO

02/03/2009

Electronic Signature of Signing Officer or Director

Date