

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 23 1998 8:00am
Secretary of State

DOCUMENT # N36919

(1)

1. Corporation Name

PROJECT RESPONSE, INC.

Principal Place of Business

Mailing Address

745 S APOLLO BLVD
MELBOURNE FL 32901
US

745 S. APOLLO BLVD
MELBOURNE FL 32901
US

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	

3. Date Incorporated or Qualified

03/05/1990

4. FEI Number

59-3036563

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?



Yes



No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEVIS, JIMMIE N.
601 EAST NEW HAVEN AVE
MELBOURNE FL 32901

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE Jimmie N. Bevis Jimmie N. Bevis President of the Board 7-17-98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	DELETE
NAME	BEVIS, JIMMIE N.	
STREET ADDRESS	601 EAST NEW HAVEN AVE.	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	VD	DELETE
NAME	CARTER, SCOTT	
STREET ADDRESS	121 W. ROBINSON STREET	
CITY-ST-ZIP	ORLANDO FL	
TITLE	S	DELETE
NAME	WILSON, NANCY	
STREET ADDRESS	4000 OLD SETTLEMENT ROAD	
CITY-ST-ZIP	MERRITT ISLAND FL	
TITLE	TD	DELETE
NAME	CALDERWOOD, JOE	
STREET ADDRESS	3455 FLOUNDER CREED RD	
CITY-ST-ZIP	MIMS FL	
TITLE	D	DELETE
NAME	BHAGAVATI, MA JAYA	
STREET ADDRESS	1115 ROSELAND ROAD - UNIT 11	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	D	DELETE
NAME	PIERONE, JR. G	
STREET ADDRESS	1300 36TH STREET, SUITE D	
CITY-ST-ZIP	VERO BEACH FL	

1.1 TITLE	Picard, William Guy	Change	Addition
1.2 NAME	41 Circle Ave		
1.3 STREET ADDRESS	Melbourne, FL 32935		
1.4 CITY-ST-ZIP			
2.1 TITLE	Tiller, Martha	Change	Addition
2.2 NAME	610 Magnolia Ave		
2.3 STREET ADDRESS	Melbourne, FL 32935		
2.4 CITY-ST-ZIP			
3.1 TITLE	Mulligan, Barbara	Change	Addition
3.2 NAME	1700 N. Atlantic Ave #111		
3.3 STREET ADDRESS	Cocoa Beach, FL 32931		
3.4 CITY-ST-ZIP			
4.1 TITLE	Fitzgerald, Michael	Change	Addition
4.2 NAME	3345 Sandy Reef Ct		
4.3 STREET ADDRESS	Melbourne Beach, FL 32951		
4.4 CITY-ST-ZIP			
5.1 TITLE	Brimhall, Allan	Change	Addition
5.2 NAME	Po Box 361695		
5.3 STREET ADDRESS	Melbourne, FL 32926		
5.4 CITY-ST-ZIP			
6.1 TITLE	VP	Change	Addition
6.2 NAME	Carter, Scott		
6.3 STREET ADDRESS	1235 Wilkinson St.		
6.4 CITY-ST-ZIP	Orlando, FL 32803		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jimmie N. Bevis Jimmie N. Bevis, President of Bd. 7-17-98 (407) 724-1171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)