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**CORPORATION
ANNUAL REPORT
1995**



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

95 APR 19 AM 8:33

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N46279 (8)

1. Corporation Name

PROJECT LAKE WORTH, INC.

Principal Place of Business

Mailing Address

**1701 LAKE WORTH ROAD
LAKE WORTH FL 33460**

**1701 LAKE WORTH ROAD
LAKE WORTH FL 33460**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KIRK GRANTHAM, ESQUIRE
1880 FOREST HILL BLVD., SUITE 105
WEST PALM BEACH FL 33406**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	SPELLMAN, RICHARD A
STREET ADDRESS	300 N. DIXIE HWY.
CITY - ST - ZIP	LAKE WORTH FL 33460
TITLE	VD
NAME	HARVEY, JOHN
STREET ADDRESS	320 N. LAKESIDE DR.
CITY - ST - ZIP	LAKE WORTH FL 33460
TITLE	SD
NAME	FOLEY, ED
STREET ADDRESS	718 SO. K STREET
CITY - ST - ZIP	LAKE WORTH FL 33460
TITLE	TD
NAME	GASTON, JOHN
STREET ADDRESS	14 N. FEDERAL HWY.
CITY - ST - ZIP	LAKE WORTH FL 33460
TITLE	PD
NAME	CAPPELLA, JOSEPH A
STREET ADDRESS	404 W. LANTANA RD.
CITY - ST - ZIP	LAKE WORTH FL 33462
TITLE	D
NAME	CANTLEY, DAVID
STREET ADDRESS	1701 LAKE WORTH RD.
CITY - ST - ZIP	LAKE WORTH FL 33460

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	FOLEY, E. J. JR.	
1.3 STREET ADDRESS	716 S. K STREET	
1.4 CITY - ST - ZIP	LAKE WORTH, FL 33460	
2.1 TITLE	VD	☒ Change ☐ Addition
2.2 NAME	TATE, JONI	
2.3 STREET ADDRESS	1425 LUCERNE AVENUE	
2.4 CITY - ST - ZIP	LAKE WORTH, FL 33460	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	PASTON, RHONDA	
3.3 STREET ADDRESS	2610 HOLY CROSS LANE	
3.4 CITY - ST - ZIP	LAKE WORTH, FL 33460	
4.1 TITLE	TD	☒ Change ☐ Addition
4.2 NAME	RASMUSSEN, LAURIE	
4.3 STREET ADDRESS	631 N. O STREET	
4.4 CITY - ST - ZIP	LAKE WORTH, FL 33460	
5.1 TITLE	D	☐ Change ☐ Addition
5.2 NAME	CAPPELLA, JOSEPH A.	
5.3 STREET ADDRESS	404 W. LANTANA RD.	
5.4 CITY - ST - ZIP	LAKE WORTH, FL 33462	
6.1 TITLE	D	☐ Change ☐ Addition
6.2 NAME	CANTLEY, DAVID	
6.3 STREET ADDRESS	1701 LAKE WORTH ROAD	
6.4 CITY - ST - ZIP	LAKE WORTH, FL 33460	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: E. J. FOLEY, JR., PR. 2/8/95 (407) 533-6364

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #