FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 10:58

DOCUMENT # **N50545** **(5)**

1. Corporation Name

RUSSIAN PEOPLES RELIEF PROJECT, INC.

Principal Place of Business	Mailing Address
3330 TROJAN RD VENICE FL 34293	3330 TROJAN RD VENICE FL 34293

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/24/1992
3a. Date of Last Report: 05/26/1994
4. FEI Number: 65-0355021 ☐ 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. 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

2. Principal Place of Business	2a. Mailing Address
21 670 Shetland Circle	26 670 Shetland Circle
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Nokomis, Fl	City & State 28 Nokomis, Fl
Zip 24 34275 Country 25 Sarasota	Zip 29 34275 Country 30 Sarasota

9. Name and Address of Current Registered Agent

JANSEN, MICHAEL K.
3330 TROJAN RD
VENICE FL 34293

10. Name and Address of New Registered Agent

81 Name: Jeffrey McClay
82 Street Address (P.O. Box Number is Not Acceptable):
83: 670 Shetland Circle
84 City: Nokomis FL 85 Zip Code: 34275

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: Jeffrey McClay — DATE: 4/24/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	HALL, RALPH	12 NAME	William Cooler	
STREET ADDRESS	13001 GRAVOIS RD.	13 STREET ADDRESS	3357 Sunset Brook Dr.	
CITY-ST-ZIP	SUNSET HILLS MO 63127	14 CITY-ST-ZIP	Venice, Fl 34293	
TITLE	VD	21 TITLE	V D	☒ Change ☐ Addition
NAME	JANSEN, MICHAEL K	22 NAME	John Outerbridge	
STREET ADDRESS	3330 TROJAN RD,	23 STREET ADDRESS	2890 Tern Road	
CITY-ST-ZIP	VENICE FL 34293	24 CITY-ST-ZIP	Venice, Fl 34293	
TITLE	STD	31 TITLE	T D	☒ Change ☐ Addition
NAME	JANSEN, KATHLEEN	32 NAME	Jeffrey Cunningham	
STREET ADDRESS	3330 TROJAN RD.	33 STREET ADDRESS	750 Sugarwood Way	
CITY-ST-ZIP	VENICE FL 34293	34 CITY-ST-ZIP	Venice, Fl 34293	
TITLE		41 TITLE	S D	☐ Change ☒ Addition
NAME		42 NAME	Jeffrey McClay	
STREET ADDRESS		43 STREET ADDRESS	670 Shetland Circle	
CITY-ST-ZIP		44 CITY-ST-ZIP	Nokomis, Fla 34275	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP	Rena Tinley	

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 119.07(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: Jeffrey McClay — 4/24/95 — 813-482-0212 — 813-482-3160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084448