2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 12, 2005
Secretary of State

DOCUMENT# N94000005207

Entity Name: PROJECT ACTION FOUNDATION, INC.

Current Principal Place of Business:

8994 SEMINOLE BLVD.
#7
SEMINOLE, FL 34642

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3420
SEMINOLE, FL 34645

New Mailing Address:

FEI Number: 59-3276734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRADEN, JIM
8994 SEMINOLE BLVD.
SUITE 7
SEMINOLE, FL 34642 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:	D	( ) Delete
Name:	GRADEN, JIM	
Address:	9112 SEMINOLE BLVD.	
City-St-Zip:	SEMINOLE, FL 34642	
Title:	D	( ) Delete
Name:	WALKER, KEVIN	
Address:	13440 BELLEWOOD AVE	
City-St-Zip:	SEMINOLE, FL 33776	
Title:	D	( ) Delete
Name:	SHOOK, KIMBERLY	
Address:	225 COUNTRY CLUB DR. #218	
City-St-Zip:	LARGO, FL 34642	
Title:	D	( ) Delete
Name:	GRADEN, SUSAN	
Address:	2249 14TH AVE. S.W.	
City-St-Zip:	LARGO, FL 34646	
Title:	D	( ) Delete
Name:	KILMER, JEANNE	
Address:	4212 POINSETTIA DR.	
City-St-Zip:	ST. PETE BEACH, FL 33706	
Title:	D	( ) Delete
Name:	OPPENHEIM, JEFF	
Address:	5629 HILLSIDE ST N	
City-St-Zip:	SEMINOLE, FL 34642	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEVIN J. WALKER D 08/12/2005

Electronic Signature of Signing Officer or Director — Date