

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003408

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** THE PARENTING PROJECT, INC.

**Current Principal Place of Business:**

454 NE 3RD STREET  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

454 NE 3RD STREET  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 65-0603238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BACKER, KEITH ESQ.  
400 S DIXIE HWY # 420  
BOCA RATON, FL 33432 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: S  
Name: MCDERMOTT, DANA  
Address: 6441 N WAYNE  
City-St-Zip: CHICAGO, IL 60626

Title: VPD  
Name: FERDMAN, GARY  
Address: 170 EAST 83RD STREET, # 2J  
City-St-Zip: NEW YORK, NY 10028

Title: P  
Name: GARFINKLE, SUZY  
Address: 2674 NW 41ST STREET  
City-St-Zip: BOCA RATON, F 33434

Title: T  
Name: MAXWELL, DORRIE CPA  
Address: 1233 SW 4TH AVENUE  
City-St-Zip: BOCA RATON, FL 33432

Title: D  
Name: BACKER, KEITH  
Address: 400 S DIXIE HWY # 420  
City-St-Zip: BOCA RATON, FL 33432

Title: ED  
Name: SCHUVER, ANDREA  
Address: 454 NE 3RD STREET  
City-St-Zip: BOCA RATON, FL 33432

I hereby 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 all other like empowered.

SIGNATURE: ANDREA SCHUVER

ED

03/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date