

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002804

FILED  
Mar 14, 2005  
Secretary of State

Entity Name: THE PERFORMANCE PROJECT, INC.

## Current Principal Place of Business:

12233 SW 55TH STREET  
STE 807  
COOPER CITY, FL 33330

## New Principal Place of Business:

8745 SW 57TH ST.  
COOPER CITY, FL 33328

## Current Mailing Address:

12233 SW 55TH STREET  
STE 807  
COOPER CITY, FL 33330

## New Mailing Address:

8745 SW 57TH ST.  
COOPER CITY, FL 33328

FEI Number: 65-0670093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FELICE, NINA  
8050 CLEARY BLVD.  
#508  
PLANTATION, FL 33325 US

## Name and Address of New Registered Agent:

FELICE, NINA  
8745 SW 57TH ST.  
COOPER CITY, FL 33328 US

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:

03/14/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BARSON, ROBIN  
Address: 10180 SW 139TH CT.  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: FELICE, NINA  
Address: 8050 CLEARY BLVD. #508  
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Delete  
Name: HEMMER, PAM  
Address: 11700 NW 14TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: QUERIMIT, FELIPE  
Address: 3312 FRANKLIN LANE  
City-St-Zip: ROCKAWAY, NJ 07866

Title: D ( ) Delete  
Name: LACEY, BOB  
Address: 9520 SW 6TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete  
Name: SABATINO, MICHAEL  
Address: 1315 NW 167TH AVE.  
City-St-Zip: PEMBROKE PINES, FL 33028

## 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: NINA FELICE

D

03/14/2005

Electronic Signature of Signing Officer or Director

Date