

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

04 APR 29 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # <u>PO4000062050</u>					
1. Entity Name RIGHT DIRECTION, INC.					
Principal Place of Business 5656 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463			Mailing Address 5656 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
STEWART, JAYNE M 631 LINNET CIRCLE DELRAY BEACH, FL 33444			Name <u>STEWART, JAYNE M.</u> Street Address (P.O. Box Number is Not Acceptable) <u>33 SE. 1st Ave, Suite 102</u> City <u>Delray Beach</u> <u>FL</u> Zip Code <u>33444</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when renewing)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD ROCKETT, JAMES M 5656 STRAWBERRY LAKES CIRCLE LAKE WORTH, FL 33463		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTC D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD STEWART, JAYNE M 631 LINNET CIRCLE DELRAY BEACH, FL 33444		TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ☒ Change ☐ Addition STEWART, JAYNE M. 33 S.E. 1st Ave, Suite 102 DELRAY BEACH, FL 33444	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JACK, BARBARA 806 DATE PALM LARGO, FL 33778		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VMD ☐ Change ☒ Addition Rockett, Nancy L 5656 Strawberry Lakes Circle Lake Worth, FL 33463	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u>James M Rockett</u> James M Rockett, President 4/5/04 561-255-9269					