2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021268

FILED Apr 15, 2009 Secretary of State

| Entity Nar | me: PROJEC | TS OF POLK COUNTY, INC. | | | |
|---|---|----------------------------------|------------------------------------|--|--|
| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
| | TH 15TH STRE EE, FL 34142 | ET | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 301 NORTH 15TH STREET IMMOKALEE, FL 34142 | | | PO BOX 970 IMMOKALEE, FL 3414 | PO BOX 970 IMMOKALEE, FL 34143 | |
| FEI Number: | 20-4313987 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 301 NORT | , CURTIS D H 15TH STRE EE, FL 34142 | ET US | | | |
| | named entity : e of Florida. | submits this statement for the p | ourpose of changing its registered | I office or registered agent, or both, | |
| SIGNATUF | RE: | | | | |
| | Electror | ic Signature of Registered Age | ent | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: | VST () PECOT, TED 301 NORTH 15 | Delete | Name: PECOT, TED | (X) Change()Addition)) WORTH PLACE | |

City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: WINTER HAVEN, FL 33881

() Delete Title: () Change () Addition

BLOCKER, CURTIS D Name: Name: Address: 301 NORTH 15TH STREET Address: IMMOKALEE, FL 34142 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CURTIS BLOCKER PD 04/15/2009