

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000023866

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

3087 HAMBLIN WAY  
WELLINGTON, FL 33414

**New Principal Place of Business:**

11278 86TH RD NORTH  
WEST PALM BEACH, FL 33412

**Current Mailing Address:**

3087 HAMBLIN WAY  
WELLINGTON, FL 33414

**New Mailing Address:**

11278 86TH RD NORTH  
WEST PALM BEACH, FL 33412

**FEI Number:** 27-2142986

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARGREAVES, COREY  
3087 HAMBLIN WAY  
WELLINGTON, FL 33414 US

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

HARGREAVES, COREY  
11278 86TH RD NORTH  
WEST PALM BEACH, FL 33412 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/18/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HARGREAVES, COREY  
Address: 11278 86TH RD NORTH  
City-St-Zip: WEST PALM BEACH, FL 33412

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: COREY HARGREAVES

P

04/18/2011

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

\_\_\_\_\_  
Date