2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
05-11-2001 90059 009 ***150.00

DOCUMENT # P99000017972

1. Entity Name
PROJECT DEVELOPMENT INC;

Principal Place of Business	Mailing Address
524 MADISON AVE. ORLANDO FL 32805	524 MADISON AVE. ORLANDO FL 32805

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
FLORIDA	524 MADISON AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL	City & State: ORLANDO, FL
Zip: 32805 Country: U.S.	Zip: 32805 Country: U.S.

4. FEI Number 59-3557447 ☐ Applied For ☐ 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
FRANCOIS, MRANR 524 MADISON AVE. ORLANDO FL 32805	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FRANCOIS, MRAND[e spelling] 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT FRANCOIS, MRANR 524 MADISON AVE ORLANDO, FL 32805.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FRANCOIS, DAVID 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec Vice President Project Manager Francois, DAVID 524 Madison Ave Orlando, FL 32805	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS STEVENSON, FRANCOIS 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec Vice President Sales/Marketing Francois, Stevenson 524 Madison Ave Orlando, FL 32805	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C FRANCOIS, VENNIA 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec Vice President operations Francois, Vennia 524 Madison Ave Orlando, FL 32805.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C FRANCOIS, CLAUDETTE 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec. VP Administration/HR Francois, Claudette 524 Madison Ave Orlando, FL 32805	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C FRANCOIS, S. FILS 524 MADISON AVE ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Exec. VP. Project Development Francois, S Fils 524 Madison Ave Orlando, FL 32805	☒ Change ☐ Addition

CR2E034 (10/00)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Francois 1/04/01 (407)423-4527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #