

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000823

**Entity Name:** PROJECT NOW INTERGENERATIONAL OUTREACH, INC.

**Current Principal Place of Business:**

4902 N 22ND STREET  
TAMPA, FL 33610

**Current Mailing Address:**

4902 N 22ND STREET  
TAMPA, FL 33610

**FEI Number: 47-0854496**

**Certificate of Status Desired: No**

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

DEAN, DANIEL SR.  
919 E EMMA ST  
TAMPA, FL 33603 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: DANIEL DEAN SR.**

**04/29/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DEAN, DANIEL SR.  
Address 919 E EMMA ST  
City-State-Zip: TAMPA FL 33603

Title D  
Name DEAN, DANIEL JR.  
Address 919 E. EMMA STREET  
City-State-Zip: TAMPA FL 33603

Title D  
Name COLE, ANTHONY JSR  
Address 7509 TERRACE RIVER DR  
City-State-Zip: TAMPA FL 33637

Title VP  
Name JENKINS, SHARLA  
Address 3201 E FRIERSON AVE  
City-State-Zip: TAMPA FL 33610

Title DIRECTOR  
Name DEAN, SUZETTE  
Address 919 E EMMA STREET  
City-State-Zip: TAMPA FL 33603

Title DIRECTOR  
Name DEAN, ABIGAIL  
Address 4902 N 22ND STREET  
City-State-Zip: TAMPA FL 33610

Title DIRECTOR  
Name JENKINS, SARAH  
Address 3201 E FRIERSON AVE  
City-State-Zip: TAMPA FL 33610

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

**SIGNATURE: SUZETTE DEAN**

**DIRECTOR**

**04/29/2024**

Electronic Signature of Signing Officer/Director Detail

Date