

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006301

Entity Name: PROJECT R.O.C.K. SOUTH, INC.**Current Principal Place of Business:**439 SE PORT ST LUCIE BLVD STE 103
PORT ST. LUCIE, FL 34984**Current Mailing Address:**3286 OLD EDWARDS ROAD
FORT PIERCE, FL 34981**FEI Number:** 20-3076543**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROTH, MARIE
3286 OLD EDWARDS ROAD
FORT PIERCE, FL 34981 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

Date

Officer/Director Detail :

Title DIRECTOR
Name TOWNSEND, QUEEN S
Address 5335 NW NASSAU LN.
City-State-Zip: PORT ST. LUCIE FL 34983

Title DIRECTOR
Name GIBSON, DONNA
Address 1702 N. 15TH ST.
City-State-Zip: FORT PIERCE FL 34950

Title CHAIRMAN
Name NORMAN, JEAN-CLAUDE
Address 1124 SW 35TH ST
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR
Name JACKSON, MS
Address 1173 SW GRANADEER ST
City-State-Zip: PORT ST LUCIE FL 34983

Title CEO
Name FRECKLETON, LORNA
Address 439 SE PORT ST LUCIE BLVD STE 101
City-State-Zip: PORT ST LUCIE FL 34952

Title DIRECTOR
Name HALL, DAVID
Address P.O. BOX 9342
City-State-Zip: PORT ST. LUCIE FL 34985-9342

Title DIRECTOR
Name BYRD, RUFUS
Address 10620 SW VILLAGE PARKWAY
City-State-Zip: PORT ST LUCIE FL 34987

Title SECRETARY
Name LOWE, KIMBERLY
Address 230 SW SANDY WAY
City-State-Zip: PORT ST LUCIE FL 34986

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: LORNA FRECKLETON

CEO

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date