

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000005369

Entity Name: PROJECT TVD, INC.**Current Principal Place of Business:**3622 1ST ST S
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**3622 1ST ST S
JACKSONVILLE BEACH, FL 32250 US**FEI Number: 82-1491261****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DINH, TRI A
3622 1ST ST S
JACKSONVILLE BEACH, FL 32250 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	P/T
Name	DINH, TRI A
Address	3622 1ST ST S
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	VP
Name	MAMA, SAIFUDDIN
Address	426 BRIDGEBORO ROAD
City-State-Zip:	MOORESTOWN NJ 08057

Title	TR
Name	DINH, TUE A
Address	4703 PINE CIRCLE
City-State-Zip:	BELLAIRE TX 77401

Title	SEC
Name	MCKINNEY, J MARK
Address	13648 QUEENS HARBOR BLVD N
City-State-Zip:	JACKSONVILLE FL 32225

Title	TRUSTEE
Name	MAMA, ROBIN
Address	426 BRIDGEBORO ROAD
City-State-Zip:	MOORESTOWN NJ 08057

Title	TRUSTEE
Name	OLSON, GAYLE
Address	11924 SPORTSMAN ROAD
City-State-Zip:	GALVESTON TX 77554

Title	TRUSTEE
Name	DINH, MIMI
Address	3622 1ST ST S
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	TRUSTEE
Name	DEMMON, MYN
Address	99 SUTHERLAND DRIVE
City-State-Zip:	ATHERTON CA 94027

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: TRI A. DINH**PRESIDENT****03/08/2025**

Electronic Signature of Signing Officer/Director Detail

Date