

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36919

Entity Name: PROJECT RESPONSE, INC.**Current Principal Place of Business:**745 S APOLLO BLVD
MELBOURNE, FL 32901**Current Mailing Address:**745 S APOLLO BLVD
MELBOURNE, FL 32901 US**FEI Number:** 59-3036563**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PEARCE, DANIEL
1113 CABLE LANE
PALM BAY, FL 32905 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 D
Name DISALVIO, HARRY
Address 641 BRADDOCK ST
City-State-Zip: SEBASTIAN FL 32958

Title D
Name WELTON, LAURIE
Address 116 QUEEN CHRISTINA COURT
City-State-Zip: FORT PIERCE FL 34949

Title P
Name PEARCE, DANIEL
Address 1113 CABLE LANE
City-State-Zip: PALM BAY FL 32905

Title VP
Name CONDE-ROSA, ANA
Address P.O. BOX 780842
City-State-Zip: SEBASTIAN FL 32978

Title SECRETARY
Name WHITE, RONALD
Address 3526 EGRET DRIVE
City-State-Zip: MELBOURNE FL 32901

Title TREASURER
Name HARRISON, ROBERT
Address 3005 THRUSH DRIVE
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name SIBOLE, DENNIS
Address 502 HYDER STREET, NE
City-State-Zip: PALM BAY FL 32907

Title DIRECTOR
Name BRYAN, LISA
Address 261 AVENIDA DE PAZ
City-State-Zip: INDIALANTIC, FL 32903 FL 32903

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: DANIEL PEARCE**PRESIDENT****01/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date