

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000007836

Entity Name: PROJECT ALIVE, INC.

Current Principal Place of Business:

7318 HOLIDAY DR.
SPRING HILL, FL 34606

Current Mailing Address:

PO BOX 3521
SPRING HILL, FL 34611 US

FEI Number: 46-4617970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEATTY, KAREN
7318 HOLIDAY DR.
SPRING HILL, FL 34606 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 CHAIRMAN
Name HOFFMAN, ANDREW
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title VC
Name UNDERWOOD, KYLE
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title SECRETARY
Name FERULLO, JULIE
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title TREASURER
Name HENRIQUEZ, JEANETTE
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title PRESIDENT
Name MCKAY, KRISTIN
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name GRANT, NATHAN
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name HAAS, ADAM
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name WIEBELT, ASHLY
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

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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: KAREN BEATTY

DIRECTOR OF OPERATIONS

01/16/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BLAIN, CORY
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name ESTEVEZ, JENNIFER
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name JONES, KYRAH
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title OTHER
Name BEATTY, KAREN
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name GORDON, DAIZA
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name FUHRMANN, KEVIN
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611

Title DIRECTOR
Name PEDROZA, MIRIAM
Address PO BOX 3521
City-State-Zip: SPRING HILL FL 34611