

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 02, 2009
Secretary of State**

DOCUMENT# N02000001819

Entity Name: THE CEDAR BENNETT PROJECT, INC.

Current Principal Place of Business:

515 BELLEVIEW BLVD
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

515 BELLEVIEW BLVD
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 46-0476635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENFELD, EDWARD
515 BELLEVIEW BLVD
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSENFELD, EDWARD
Address: 515 BELLEVIEW BLVD
City-St-Zip: CLEARWATER, FL 33757

Title: SD () Delete
Name: PORTER, WAYNE
Address: 603 ENGMAN
City-St-Zip: CLEARWATER, FL 33757

Title: TD () Delete
Name: ROSENFELD, MERRY
Address: 515 BELLEVIEW BLVD
City-St-Zip: CLEARWATER, FL 33757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD ROSENFELD

PD

02/02/2009

Electronic Signature of Signing Officer or Director

_____ Date