

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006579

FILED  
Feb 04, 2010  
Secretary of State

**Entity Name:** URBAN ASSISTANCE CORPORATION

**Current Principal Place of Business:**

8901 NW 79TH CT  
TAMARAC, FL 33321 US

**New Principal Place of Business:**

**Current Mailing Address:**

8901 NW 79TH CT  
TAMARAC, FL 33321 US

**New Mailing Address:**

**FEI Number:** 59-3259774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HAYNES, MICHAEL  
2602 EAST 21ST AVE  
TAMPA, FL 33605 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: D  
Name: HAYNES, CHRISTOPHER  
Address: 1003 EAST ELLICOTT STREET  
City-St-Zip: TAMPA, FL 33603 US

Title: D  
Name: JOHNSON, JENNIFER  
Address: 33 ANTHONY CIRCLE  
City-St-Zip: ENTERPRISE, AL 36330 US

Title: C  
Name: SNELL, WILLIE A  
Address: 1401 WEST SPENCER ST  
City-St-Zip: PLANT CITY, FL 33563 US

Title: P  
Name: HAYNES, MICHAEL  
Address: 2602 EAST 21ST AVENUE  
City-St-Zip: TAMPA, FL 33605 US

Title: VP  
Name: BELL, BRYANT SR  
Address: PO BOX 4066  
City-St-Zip: WINTER PARK, FL 32793 US

Title: S  
Name: HORNE, ANNIE  
Address: 7704 RIVERINE RD  
City-St-Zip: TAMPA, FL 33637 US

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:** /S/MICHAELAHAYNES

**PRES**

**02/04/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date