2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001704

Entity Name: PROJECT DIRECT, INC.

TAMPA, FL 33609

City-St-Zip:

FILED Aug 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4523 AZEELE ST 310 SEA ISLAND WAY TAMPA, FL 33609 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

4523 AZEELE ST. W. 310 SEA ISLAND WAY TAMPA, FL 33609 TAMPA, FL 33602

FEI Number: 58-2261868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COKER, RAY
4523 AZEELE ST. W.
TAMPA, FL 33609 US
COKER, RAY
310 SEA ISLAND WAY
TAMPA, FL 33602 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: 08/19/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

TAMPA, FL 33602

 Title:
 PC
 () Delete
 Title:
 PC
 (X) Change () Addition

 Name:
 COKER, RAY A
 Name:
 COKER, RAY A

 Address:
 4523 AZEELE ST. W.
 Address:
 310 SEA ISLAND WAY

Address: 4023 AZEELE ST. W. Address: 310 SEA ISLAND WA
City-St-Zip: TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33602

 Title:
 TVC
 () Delete
 Title:
 TVC
 (X) Change () Addition

 Name:
 COKER, DARLENE
 Name:
 COKER, DARLENE

 Address:
 4523 AZEELE ST. W.
 Address:
 310 SEA ISLAND WAY

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAY COKER PC 08/19/2005