

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007537

FILED
Apr 19, 2007
Secretary of State

Entity Name: FARM PILOT PROJECT COORDINATION, INC.

Current Principal Place of Business:

101 E. KENNEDY BLVD.
SUITE 3250
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 3031
TAMPA, FL 33601 US

New Mailing Address:

FEI Number: 02-0534828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALEM, RICHARD J ESQ.
101 E. KENNEDY BLVD.
SUITE 3250
TAMPA, FL 33602 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 () Delete
Name: SALEM, RICHARD J ESQ
Address: 101 EAST KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: EURE, HILLIARD CPA
Address: 101 EAST KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: ZAYTOUN, ROBERT J ESQ
Address: 101 EAST KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: CARNAHAN, ROBERT P PHD
Address: 101 E KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602 US

Title: O () Delete
Name: ROYER, SARA G TREASU
Address: 101 E KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: EURE, HILLIARD M CPA
Address: 101 EAST KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602

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

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

Title: O (X) Change () Addition
Name: ROYER, SARA G CFO
Address: 101 E KENNEDY BLVD. #3250
City-St-Zip: TAMPA, FL 33602 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SARA G ROYER

O

04/19/2007

Electronic Signature of Signing Officer or Director

Date