

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 23, 2005
Secretary of State**

DOCUMENT# N03000007050

Entity Name: COMMUNITY URBAN PROJECT, INCORPORATED

Current Principal Place of Business:

334 SW EXPLORER GLEN
FORD WHITE, FL 32038

New Principal Place of Business:

334 SW EXPLORER GLEN
FORT WHITE, FL 32038

Current Mailing Address:

334 SW EXPLORER GLEN
FORD WHITE, FL 32038

New Mailing Address:

334 SW EXPLORER GLEN
FORT WHITE, FL 32038

FEI Number: 81-0629004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FLEMING, ANDREIA
334 SW EXPLORER GLEN
FORD WHITE, FL 32038 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: JONES, REBECCA
Address: 760 SE 8TH ST
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: HOUSTON, SHUNTI
Address: 1600 PULLEN RD APT 8-D
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: MARSHALL-SEALS, OCTAVIA
Address: 12412 TITUS CT
City-St-Zip: TAMPA, FL 33612

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREIA NICHOLS-FLEMING

COO

08/23/2005

Electronic Signature of Signing Officer or Director

_____ Date