

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007460

FILED
Apr 28, 2009
Secretary of State

Entity Name: PASSION FOR PRISON, INC.

Current Principal Place of Business:

3773 MOTT RD
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 273721
TAMPA, FL 336883721

New Mailing Address:

FEI Number: 57-1184543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
4001 WEST HENRY AVENUE
SUITE 306
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 N. DALE MABRY HIGHWAY
STE 110
TAMPA, FL 33618 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: NICKOLAS SPRADLIN ESQ. CEO

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SANTIAGO, JESSICA
Address: 3773 MOTT RD
City-St-Zip: DOVER, FL 33527

Title: SD () Delete
Name: JOHNSON, CYNTHIA
Address: 6009 OSPREY LAKE CIRCLE
City-St-Zip: RIVERVIEW, FL 33578 US

Title: D () Delete
Name: SANTIAGO, SCOTT A
Address: 3773 MOTT RD
City-St-Zip: DOVER, FL 33527 US

Title: D () Delete
Name: DAVIS, CARLA M
Address: 3773 MOTT ROAD
City-St-Zip: DOVER, FL 33527 US

Title: D () Delete
Name: WATSON, JOEL
Address: PO BOX 15056
City-St-Zip: TAMPA, FL 33684 US

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:

Title: D (X) Change () Addition
Name: DAVIS, CARLA M
Address: 1488 KODAK DR.
City-St-Zip: TITUSVILLE, FL 32796 US

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: JESSICA SANTIAGO

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date