2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005965

Entity Name: UPWARD OF MAYO, INC.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P.O. BOX 58 MAYO, FL 32066 Current Mailing Address:			226 NW BLOXHAM MAYO, FL 32066	226 NW BLOXHAM ST MAYO, FL 32066 New Mailing Address:	
			New Mailing Addre		
P.O. BOX MAYO, FL					
FEI Number	: 56-2464489	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
	ARY, JOHN D LOXHAM ST . 32066 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PT (SINGLETARY, P.O. BOX 58 MAYO, FL 320		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (SINGLETARY, P.O. BOX 58 MAYO, FL 320		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BARRINGTON, 3170 NW CR 5 MAYO, FL 320	3	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BARRINGTON, 606 SW FREE MAYO, FL 320	DOM ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SUNNY, WIMB 10268 W US 2 MAYO, FL 320	7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (TEMPLIN, KAY 7349 NW CR 5 MAYO, FL 320	3	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JOHN D. SINGLETARY PT 01/12/2009