

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010826

FILED
Jan 13, 2005
Secretary of State

Entity Name: THE WAY OF THE UPRIGHT, INC.

Current Principal Place of Business:

1105 CHEROKEE DRIVE
WAYCROSS, GA 31501

New Principal Place of Business:

110 TEGA CAY PL
#2004
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

1105 CHEROKEE DRIVE
WAYCROSS, GA 31501

New Mailing Address:

110 TEGA CAY PL
#2004
PONTE VEDRA BEACH, FL 32082

FEI Number: 20-2153311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAY, JONATHAN L
1548 LANCASTER TERRACE
JACKSONVILLE, FL 32204 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: ROGERS, THOMAS
Address: 1105 CHEROKEE DRIVE
City-St-Zip: WAYCROSS, GA 31501

Title: D () Delete
Name: ROGERS, THOMAS
Address: 1105 CHEROKEE DRIVE
City-St-Zip: WAYCROSS, GA 31501

Title: D () Delete
Name: TIBOR, JOAN
Address: 417 WILLIAMS STREET
City-St-Zip: WAYCROSS, GA 31502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TIBOR, JOAN
Address: 110 TEGA CAY PL #2004
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change () Addition
Name: HALE, JULIE
Address: 8550 TOUCHTON RD #1724
City-St-Zip: JACKSONVILLE, FL 32216

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: JOAN TIBOR

D

01/13/2005

Electronic Signature of Signing Officer or Director

Date