

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006485

FILED  
Apr 26, 2008  
Secretary of State

**Entity Name:** THE PAPER AIRPLANES PROJECT, INC.

**Current Principal Place of Business:**

119 30TH AVE. NORTH  
ST. PETERSBURG, FL 33704

**New Principal Place of Business:**

**Current Mailing Address:**

119 30TH AVE. NORTH  
ST. PETERSBURG, FL 33704

**New Mailing Address:**

**FEI Number:** 20-3524747

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOODY, LISA E PRES  
3225 S. MACDILL AVENUE  
129298  
TAMPA, FL 33629 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: MOODY, LISA  
Address: 119 30TH AVE. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D ( ) Delete  
Name: ASSIFF, MARY ANN  
Address: 432 23 AVE. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33704

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: LISA E. MOODY

PRES

04/26/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date