

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002939

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: REACH UP, INC.

## Current Principal Place of Business:

10500 UNIVERSITY CENTER DRIVE  
SUITE 100  
TAMPA, FL 33612

## New Principal Place of Business:

## Current Mailing Address:

10500 UNIVERSITY CENTER DRIVE  
SUITE 100  
TAMPA, FL 33612

## New Mailing Address:

FEI Number: 20-8437749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERRY, ESTRELLITA MRS.  
10500 UNIVERSITY CENTER DRIVE  
SUITE 100  
TAMPA, FL 33612 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: LOCKETT, MARION DR.  
Address: 4205 FAIRWAY CIRCLE  
City-St-Zip: TAMPA, FL 33618 US

Title: D ( ) Delete  
Name: MORRISON-RODRIGUEZ, BARBARA DR.  
Address: 16703 BLENHEIM DRIVE  
City-St-Zip: LUTZ, FL 33549 US

Title: D ( ) Delete  
Name: SCOTT, SHAKA ESQ.  
Address: 100 NORTH TAMPA STREET  
City-St-Zip: TAMPA, FL 33602 US

Title: D ( ) Delete  
Name: SHEARED, RHONDA M MRS.  
Address: 2960 ROOSEVELT BOULEVARD  
City-St-Zip: CLEARWATER, FL 33760 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MAHAN, CHARLES MD  
Address: 3111 E. FLETCHER AVENUE  
City-St-Zip: TAMPA, FL 33613 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RHODES, RHONDA MRS.  
Address: 201 S. TAMPANIA AVENUE  
City-St-Zip: TAMPA, FL 33609 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: ESTRELLITA BERRY

CEO

04/15/2009

Electronic Signature of Signing Officer or Director

Date