

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010624

FILED
Aug 13, 2009
Secretary of State

Entity Name: B.A.Y. PROJECT, INCORPORATED

Current Principal Place of Business:

1116 EAST ESKIMO STREET
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

1116 EAST ESKIMO STREET
TAMPA, FL 33604

New Mailing Address:

FEI Number: 06-1797319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KINSEY, ELLEN
1116 EAST ESKIMO STREET
TAMPA, FL 33604 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: HEMMINGWAY, KIMBERLY N
Address: 3202 COLWELL AVENUE APT. 605
City-St-Zip: TAMPA, FL 33614

Title: D () Delete
Name: HILLS, TIRHONDA D
Address: 3202 COLWELL AVE APT. 605
City-St-Zip: TAMPA, FL 33614

Title: D () Delete
Name: KINSEY, ELLEN
Address: 1116 E ESKIMO ST
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: SHAW, TINA
Address: 1243 GANTILLY LANE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D () Delete
Name: GLYMPH, AUDREY
Address: 1104 EAST YUKON ST
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: KING, KEITH
Address: 11311 22ND ST, APT A215
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HEMMINGWAY, KIMBERLY N
Address: 11737 SUMMER SPRINGS DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: D (X) Change () Addition
Name: HILLS, TIRHONDA D
Address: 802 RIVERBROOK, APT. 102
City-St-Zip: TAMPA, FL 33603

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

Title: D (X) Change () Addition
Name: PAUL DEL VALLE, SARAH
Address: 3645 SUGARCREEK DRIVE
City-St-Zip: TAMPA, FL 33619

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

Title: D (X) Change () Addition
Name: JAMES, DAVID
Address: 1817 DORN COURT
City-St-Zip: SANFORD, FL 32771

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: ELLEN KINSEY

D

08/13/2009

Electronic Signature of Signing Officer or Director

Date