

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004284

FILED
Apr 23, 2009
Secretary of State

Entity Name: TURN AROUND PROJECT, INC.

Current Principal Place of Business:

1906 NANTICOKE CIRCLE
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1906 NANTICOKE CIRCLE
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, DAVID
1906 NANTICOKE CIRCLE
TALLAHASSEE, FL 32303 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: WILLIAMS, DAVID
Address: 1906 NANTICOKE CIRCLE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: LISTER, DANIEL
Address: 2207 TANGLEWOOD CIRCLE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: PETERSON, LYNN
Address: 3033 GODFREY PLACE
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAVID WILLIAMS

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date