

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000006824

FILED
Oct 15, 2008
Secretary of State

Entity Name: THE PROJECT S.H.I.N.E. INC.

Current Principal Place of Business:

1252 DEERBOURNE DR.
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

Current Mailing Address:

1252 DEERBOURNE DR.
WESLEY CHAPEL, FL 33543

New Mailing Address:

3478 ST BART LANE
301
TAMPA, FL 33614

FEI Number: 77-0693334 **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:

BARNES, RODERICK T
1252 DEERBOURNE DR.
WESLEY CHAPEL, FL 33543 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: RODERICK T BARNES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BELL, JOANN
Address: 12412 WINDMILL COVE DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: HIGGS, ROBERT
Address: 3809 BRYSTON DR.
City-St-Zip: ORLANDO, FL 32022

Title: D () Delete
Name: RIVERS, ANDREA
Address: 10040 CYPRESS SHADOW AVE.
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: THOMAS, PHIL
Address: 7242 SEED POD LOOP
City-St-Zip: WESLEY CHAPEL, FL 33545

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: O () Change (X) Addition
Name: WOOTEN, TACHONTA S
Address: 3478 ST BART LANE #301
City-St-Zip: TAMPA, FL 33614

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: TACHONTA S WOOTEN

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10/15/2008

Electronic Signature of Signing Officer or Director

Date