

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008246

FILED
Apr 23, 2009
Secretary of State

Entity Name: PROJECT AKILAH, INC.

Current Principal Place of Business:

814 SOUTH DELAWARE AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

814 SOUTH DELAWARE AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 26-0770655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, CODY F
110 NORTH 11TH STREET
2ND FLOOR
TAMPA, FL 33602 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: PCEO () Delete
Name: DAVIS, ELIZABETH D
Address: 814 SOUTH DELAWARE AVENUE
City-St-Zip: TAMPA, FL 33606

Title: VP () Delete
Name: DASHE, BRETT
Address: 570 BEALE ST, #101
City-St-Zip: SAN FRANCISCO, CA 94105

Title: ST (X) Delete
Name: TROUT, RYAN
Address: 110 NORTH SECOND ST
City-St-Zip: WOODSBORO, MD 21798

Title: BM () Delete
Name: BATES, MEREDITH
Address: 18 SUMMIT AVE
City-St-Zip: HULL, MA 02045

Title: BM () Delete
Name: HEATON, LAURA
Address: 1903 KALORAMA ROAD, NW, APT.4
City-St-Zip: WASHINGTON, DC 20009

Title: BM () Delete
Name: KAHN, ELIZABETH
Address: 25 CENTRAL PARK WEST
City-St-Zip: NEW YORK, NY 10023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: DAVIS, ELIZABETH D
Address: 814 SOUTH DELAWARE AVENUE
City-St-Zip: TAMPA, FL 33606

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: CST (X) Change () Addition
Name: HEATON, LAURA
Address: 1903 KALORAMA ROAD, NW, APT.4
City-St-Zip: WASHINGTON, DC 20009

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: ELIZABETH D DAVIS

CEO

04/23/2009

Electronic Signature of Signing Officer or Director

Date