2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004846

FILED May 01, 2009 Secretary of State

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Entity Nan	ne: PROJECT 81, INC.		
,			
Current Principal Place of Business:		New Princ	ipal Place of Business:
1573 EMBE	ER LANE		
TARPON S	SPRINGS, FL 33781		
Current Mailing Address:		New Maili	ng Address:
1573 EMBE	FR LANE		
	SPRINGS, FL 33781		
FEI Number: In accordance	30-0484555 FEI Number Applied For () FEI Nuce with s. 607.193(2)(b), F.S., the corporation did not receive	mber Not Appl the prior notic	icable () Certificate of Status Desired (X) e.
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
RHODES, BEN		BROWN, J	IARED
7520 CLEARVIEW DRIVE		1573 EMBI	ER LANE
TAMPA, FL 33634 US		TARPON SPRINGS, FL 34689 US	
	named entity submits this statement for the purpose	of changing i	ts registered office or registered agent, or both,
in the State	or Florida.		
SIGNATURE: JARED BROWN			05/01/2009
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title:	P () Delete	Title:	() Change () Addition
Name:	BROWN, JARED	Name:	
Address:	1573 EMBER LANE	Address:	
City-St-Zip:	TARPON SPRINGS, FL 33781	City-St-Zip:	
Title:	SD () Delete	Title:	() Change () Addition
Name:	BROWN, ANNIE	Name:	
Address: City-St-Zip:	1573 EMBER LANE TARPON SPRINGS, FL 33781	Address: City-St-Zip:	
Oity-St-Zip.	17AM ON OF MINGS, I E 33761	Gity-Gt-Zip.	
Title:	TD () Delete	Title:	TD (X) Change () Addition
Name:	RHODES SR., BEN W CPA	Name:	NYLUND, CLAYTON C
Address: City-St-Zip:	7520 CLEARVIEW DR TAMPA, FL 33634	Address: City-St-Zip:	1573 EMBER LANE TARPONS SPRINGS, FL 34689
- 1. J UL ZIP.		J., J. 212.	2.10 01 1111100, 1 2 0 1000

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: JARED P. BROWN P 05/01/2009