2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005827

Entity Name: FAIRY DUST PROJECT, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5314 12TH AVE S

GULFPORT, FL 33707 US

Current Mailing Address: New Mailing Address:

P.O. BOX 172

ST PETERSBURG, FL 33731 US

FEI Number: 26-2826441 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRANDENSTEIN, STACY 1310 PEACHFIELD DR VALRICO, FL 33596 US BRANDENSTEIN, STACY 12001 MARTIN LUTHER KING JR ST N APT. #3510 ST. PETERSBURG, FL 33716 US

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: STACY BRANDENSTEIN 04/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: RUNYAN, TAYLOR Name:

 Name:
 RUNYAN, TAYLOR
 Name:

 Address:
 5314 12TH AVE S
 Address:

 City-St-Zip:
 GULFPORT, FL 33707 US
 City-St-Zip:

 $\label{eq:title:P} \mbox{Title:} \qquad \mbox{P} \qquad \mbox{(λ) Change ($)$ Addition}$

Name: BRANDENSTEIN, STACY Name: BRANDENSTEIN, STACY

Address: 1310 PEACHFIELD DR Address: 12001 MARTIN LUTHER KING JR ST N APT. 3510

City-St-Zip: VALRICO, FL 33596 US City-St-Zip: ST. PETERSBURG, FL 33716 US

Title: BM () Delete Title: () Change () Addition

 Name:
 RUNYAN, BRITTANY
 Name:

 Address:
 5815 S 3RD ST
 Address:

 City-St-Zip:
 TAMPA, FL 33611 US
 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: STACY BRANDENSTEIN RA 04/20/2009