


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 8:00 am
Secretary of State

03-29-2007 90025 005 ****61.25

DOCUMENT # N29604 1. Entity Name PROJECT PUP (PETS UPLIFTING PEOPLE) FOUNDATION, INC.					
Principal Place of Business 12175 - 125TH STREET NORTH LARGO, FL 34644-3612			Mailing Address 12175 - 125TH STREET NORTH LARGO, FL 34644-3612		
2. Principal Place of Business - No P.O. Box # 6775- 102ND AVE N.		3. Mailing Address P.O. BOX 3488			
Suite, Apt. #, etc. OFFICE A		Suite, Apt. #, etc.			
City & State PINELLAS PARK FL		City & State SEMINOLE FL		4. FEI Number 03-0007502	
Zip 33782		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JENSEN, NAN 12175 - 125 STREET NORTH LARGO, FL 34644		7. Name and Address of New Registered Agent Name LINDA MILES Street Address (P.O. Box Number is Not Acceptable) 7497 RIDGE RD City SEMINOLE FL Zip Code 33772			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Linda S Miles</i></u> LINDA S. MILES 3/26/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CULP, JERE <input type="checkbox"/> Delete 11201 122ND AVE N. #M250 LARGO, FL 33778				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUTTIER, BETTY <input type="checkbox"/> Delete 9865 - 131 STREET NORTH SEMINOLE, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MATSON, DIANE <input type="checkbox"/> Delete 649 RODEO DR LARGO, FL 33771				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTSON, ANN <input checked="" type="checkbox"/> Delete 11579 116TH ST N LARGO, FL 33778				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARTON, CARMEN <input checked="" type="checkbox"/> Delete 5675 BAYVIEW DRIVE SEMINOLE, FL 33772				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANNER, BETH <input checked="" type="checkbox"/> Delete 11372 124T TERR LARGO, FL 33778				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TD MILES, LINDA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7497 RIDGE RD SEMINOLE, FL 33772					
D MATSON, DIANE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 649 RODEO DR LARGO FL 33771					
D KAPSA, LINDA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3460 COUNTRYSIDE BLVD #63 CLEARWATER, FL 33761					
D TAPPAN, KAREN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9533 86TH AVE N SEMINOLE - FL 33771					
D HARRINGTON, PAT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 11480 CARDINAL WAY LARGO FL 33774					
D BRIGGS, JOY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P.O. BOX 2471 PINELLAS PARK FL 33780					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Linda S Miles</i></u> LINDA S. MILES 3/26/07 727-399-1032 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

40044330



02192007 Chg-NP CR2E037 (12/06)

PROJECT PUP FOUNDATION

BOX 11

ADDITION

TITLE D

NAME TURNER, JANE

STREET 10263 137TH LANE N

ADDRESS LARGO FL 33774

ATTACHMENT H0044596

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