## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000004232

City-St-Zip:

TAMPA, FL 33629

Entity Name: PROJECT UPLIFT TAMPA, INC.

FILED Jun 12, 2007 Secretary of State

Littly Nai	HE. FROJECT OFLITT TAIMFA, INC.			
Current P	rincipal Place of Business:	New Prince	New Principal Place of Business:	
8130 COL0 207	ONIAL VILLAGE DRIVE	3815 EXE <sup>-</sup> 106	TER CT	
TAMPA, F	L 33625 US		RBOR, FL 34685 US	
Current Mailing Address:		New Maili	New Mailing Address:	
P O BOX 2 TAMPA, FI				
	59-3338729 FEI Number Applied For ( ) FEI N ce with s. 607.193(2)(b), F.S., the corporation did not receiv	lumber Not App		
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
JOHNSON, JOHN J 8130 COLONIAL VILLAGE DRIVE 207 TAMPA, FL 33625 US		3815 EXE #106	JOHNSON, JOHN J 3815 EXETER CT #106 PALM HARBOR, FL 34685 US	
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUR	RE:		06/12/2007	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete JOHNSON, JOHN J 8130 COLONIAL VILLAGE DRIVE TAMPA, FL 33634	Title: Name: Address: City-St-Zip:	DP (X) Change ( ) Addition JOHNSON, JOHN J 3815 EXETER CT #106 PALM HARBOR, FL 34685	
Title: Name: Address: City-St-Zip:	DV () Delete GREG, LATTER 7206 CREEKWOOD CT TAMPA, FL 33615	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DT () Delete SCOTT, WHITELY 4115 WEST TAKON ST TAMPA, FL 33603	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete MACE, STEPHEN 4020 PALMIRA TAMPA, FL 33629	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( ) Delete DERANGO, DAVID 3618 S GARDENIA DR	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JOHN J JOHNSON DP 06/12/2007