



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000107288</b> 1. Entity Name PRJ OF TAMPA, INC.	
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Principal Place of Business 305 SUNNY LANE CLEARWATER, FL 33756	Mailing Address 305 SUNNY LANE CLEARWATER, FL 33756
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**DO NOT WRITE IN THIS SPACE**



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3576011	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MANEY, RICHARD H ESQ.  
101 EAST KENNEDY BOULEVARD  
SUITE 3170  
TAMPA, FL 33602

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST ROSS-JOHNSON, PAMELA 50 COE ROAD #123 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, RONALD 50 COE ROAD #123 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSS-JOHNSON, IAN 302 EASTLEIGH DR BELLEAIR, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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000000577009  
01/05/07-80009-011 150.00

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IN THIS SPACE**

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 607, 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:** P. Johnson, PAMELA ROSS-JOHNSON President 7274181940  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #