

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000005673

Entity Name: IMPOWER PROJECT, INC**Current Principal Place of Business:**2135 2ND AVE N
ST. PETERSBURG, FL 33713**Current Mailing Address:**2135 2ND AVE
ST. PETERSBURG, FL 33713 US**FEI Number:** 46-3012088**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WITHERS, DELARAN E
2135 2ND AVE
ST. PETERSBURG, FL 33713 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:** DELARAN WITHERS

09/09/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	WITHERS, DELARAN E
Address	2135 2ND AVE
City-State-Zip:	ST. PETERSBURG FL 33713

Title	VP
Name	THOMAS, TAMMY J
Address	8824 THOMAS RANCH LANE
City-State-Zip:	TAMPA FL 33626

Title	A.VP
Name	PATTERSON, LOVA M
Address	2135 2ND AVE
City-State-Zip:	ST. PETERSBURG FL 33713

Title	SECRETARY
Name	LIZOTTE, MEGAN
Address	444 3RD AVW N #8
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	TREASURER
Name	PEREZ, CHRISTINA
Address	5685 KELLY DR N
City-State-Zip:	SAINT PETERSBURG FL 33703

I hereby 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 all other like empowered.

SIGNATURE: DELARAN WITHERS

PRESIDENT

09/09/2016

Electronic Signature of Signing Officer/Director Detail

Date