

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02475

FILED
Jul 05, 2012
Secretary of State

Entity Name: INSPIRATIONAL I, INCORPORATED

Current Principal Place of Business:

8190 NW 12TH CRT
CORAL SPRINGS, FL 330716710

New Principal Place of Business:

Current Mailing Address:

8190 NW 12TH CRT
CORAL SPRINGS, FL 330716710

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLEN, W. GEORGE
800 SE 3RD AVE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FORD, ALEAN M
Address: 8190 N.W. 12TH CT
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ST
Name: FORD, ALEAN M
Address: 8190 N.W. 12TH CT
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P
Name: FORD, EDDIE JR.
Address: 418 LAKE MONTEREY CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ST
Name: FORD, JANELLE
Address: 418 LAKE MONTEREY CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: P
Name: FREEMAN, MELAINE FORD
Address: 2905 HAMPSHIRE DRIVE
City-St-Zip: AUGUSTA, GA 30909

Title: ST
Name: FREEMAN, JOHN SR.
Address: 2905 HAMPSHIRE DRIVE
City-St-Zip: AUGUSTA, GA 30909

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEAN M. FORD

P

07/05/2012

Electronic Signature of Signing Officer or Director

Date

F02475

Inspirational 1, Incorporated *please Add 2 More Names! Thanks!*

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

OFFICER/DIRECTOR NAME AND ADDRESS (CONT.)

Name and Address # 7

Title	P
Name (Last, First, Middle, Title)	ROLAND, MARLENA FORD
Street Address	8190 N.W. 12 TH CT
City, State	CORAL SPRINGS, FL
Zip Code & Country	33071

Name and Address # 8

Title	ST
Name (Last, First, Middle, Title)	ROLAND, JOHN, SR.
Street Address	8190 N.W. 12 TH CT
City, State	CORAL SPRINGS, FL
Zip Code & Country	33071

These individual are all our children and their spouses, all (6) of them.