

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003111

FILED
May 05, 2007
Secretary of State

Entity Name: THE GLOBAL COMMUNITY, INC.

Current Principal Place of Business:

15101 SHEARCREST DR.
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

PO BOX 2765
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 52-2170172 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BRENNAN, MICHAEL F
15101 SHEARCREST DR.
LITHIA, FL 33547 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: BRENNAN, MICHAEL F
Address: 15101 SHEARCREST DR.
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: BECK, RENATA C
Address: 1669 COLUMBIA DRIVE NW #406
City-St-Zip: WASHINGTON, DC 20009

Title: S () Delete
Name: HUFFMAN, DENNIS
Address: 9 MONTGOMERY AVE.
City-St-Zip: TAKOMA PARK, MD 20912

Title: T () Delete
Name: SPAIN, BERKELY
Address: 2844 WISCONSIN AVE. NW
City-St-Zip: WASHINGTON, DC 20007

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MICHAEL BRENNAN

CP

05/05/2007

Electronic Signature of Signing Officer or Director

Date