

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008094

FILED
Mar 06, 2008
Secretary of State

Entity Name: GOVENGINE, INC.

Current Principal Place of Business:

8751 LATEEN LANE
BUILDING 3, UNIT 104
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

15880-300 SUMMERLIN ROAD
SUITE 245
FORT MYERS, FL 33908

New Mailing Address:

18011 S TAMIAMI TRAIL
STE 16 - PMB 145
FORT MYERS, FL 33908

FEI Number: 20-0552223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEDLEY, HUGH W
8751 LATEEN LANE
BUILDING 3, UNIT 104
FORT MYERS, FL 33919 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: PTSD () Delete
Name: HEDLEY, HUGH W
Address: 8751 LATEEN LANE, BLD. 3, #104
City-St-Zip: FORT MYERS, FL 33919 US

Title: D () Delete
Name: HEDLEY, VICTOR H
Address: 8751 LATEEN LANE, BLD. 3, #104
City-St-Zip: FORT MYERS, FL 33919 US

Title: D () Delete
Name: RUSSELL, LELA
Address: 8751 LATEEN LANE, BLD. 3, #104
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: APONTE, VILMA L
Address: 11730 TARA DRIVE
City-St-Zip: PLANTATION, FL 33325 US

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: HUGH W HEDLEY

PTSD

03/06/2008

Electronic Signature of Signing Officer or Director

Date