

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011392

FILED
Mar 20, 2009
Secretary of State

Entity Name: ONE ON ONE, ONE BY ONE, INC.

Current Principal Place of Business:

625 HIGHWAY 231
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

625 HIGHWAY 231
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-3455773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, FRANK
625 HIGHWAY 231
PANAMA CITY, FL 32405 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: D () Delete
Name: TOTH, KERRI
Address: 1002 WEST 23RD STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: LEMENSE, WENDI
Address: 1002 WEST 23RD STREET, SUITE 400
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: WOOD, DANELLA
Address: 625 HIGHWAY 231
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: GUNN, MICHAEL
Address: 5006 HICKORY ST.
City-St-Zip: PANAMA CITY, FL 32404

Title: D () Delete
Name: SWATTS, HIGDON
Address: 1215 MARIE ANN BLVD
City-St-Zip: PANAMA CITY, FL 32401

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:

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: HIGDON SWATTS

_____ Electronic Signature of Signing Officer or Director

MR.

03/20/2009

_____ Date