2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# N05000004033

Entity Name: PERSPECTIVES ON GROWTH AND DEVELOPMENT, INC.

Current Principal Place of Business:

8620-381 NW 13TH STREET
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

8620-381 NW 13TH STREET
GAINESVILLE, FL 32653

New Mailing Address:

905 HWY 321 NW
#346
HICKORY, NC 28601 US

FEI Number: 04-3812572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOLLER, ELIZABETH A
8620-381 NW 13TH STREET
GAINESVILLE, FL 32653 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 ( ) Delete
Name: KOLLER, ELIZABETH A
Address: 8620-381 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: V ( ) Delete
Name: ROGERS, JULIA
Address: 608 J.C. NORTON ROAD
City-St-Zip: WARRENSVILLE, NC 28693

Title: T ( ) Delete
Name: DUNN, RICHARD
Address: P.O. BOX 220395
City-St-Zip: CHARLOTTE, NC 28209

Title: S ( ) Delete
Name: SHELTON, JENNIFER DEPUTY
Address: 6029 LURA ROAD
City-St-Zip: WINSTON-SALEM, NC 27104

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: ELIZABETH A. KOLLER PRES 02/13/2009

Electronic Signature of Signing Officer or Director — Date