2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007967

FILED May 01, 2006 Secretary of State

Entity Name: GETTING INTELLECTUAL RESOURCES ON LIFE'S SITUATIONS INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 2046 JACOBS PLACE #E 5764 N ORANGE BLOSSOM TRAIL ORLANDO, FL 32085 # 102 ORLANDO, FL 32810 **Current Mailing Address: New Mailing Address:** 5764 N ORANGE BLOSSOM TRAIL #102 5764 N ORANGE BLOSSOM TRAIL ORLANDO, FL 32810 #102 ORLANDO, FL 32810 FEI Number: 42-1671622 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: BLACKMON, JOLANDA BLACKMON, JOLONDA 2046 JACOBS PLACE #E 5764 N ORANGE BLOSSOM TRAIL ORLANDO, FL 32085 ORLANDO, FL 32810 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: JOLONDA BLACKMON 05/01/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BLACKMON, JOLONDA Name: Name: 5764 N ORANGE BLOSSOM TRAIL #102 Address: Address: City-St-Zip: ORLANDO, FL 32810 City-St-Zip: Title: () Delete Title: (X) Change () Addition DUMAS, DIONNE Name: DUMAS, DIONNE Name: Address: 2135 KEWANNEE TRAIL Address: 5764 N ORANGE BLOSSOM TRAIL # 102 City-St-Zip: CASSELBERRY, FL 32813 City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: (X) Change () Addition WISEMAN, ANNE E WISEMAN, ANNE E Name: Name: 6801 NASHVILLE RD 5764 N ORANGE BLOSSOM TRAIL #102 Address: Address: City-St-Zip: LANHAM, MD 20706 City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: ADV () Change (X) Addition Name: Name: GREIR, PEONCA S 5764 N ORANGE BLOSSOM TRAIL #102 Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the 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: JOLONDA BLACKMON PR 05/01/2006