2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010530

FILED Mar 30, 2007 Secretary of State

Entity Name: GO OUT AND LIVE SUCCESSFULLY, INC.

Current Principal Place of Business: New Principal Place of Business:

500 S.E. MIZNER BLVD.

#111

BOCA RATON, FL 33432 US

Current Mailing Address: New Mailing Address:

BOX 1406

BOCA RATON, FL 33429 US

FEI Number: 16-1551868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RICHARDSON, DOUGLAS W MR.

500 S.E. MIZNER BLVD.

#111

BRUBAKER, PATRICIA L MRS
798 ELM TREE LANE
BOCA RATON, FL 33486 US

BOCA RATON, FL 33432 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: PATRICIA L. BRUBAKER 03/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 RICHARDSON, DOUGLAS W MR.
 Name:
 RICHARDSON, ROBERT MR.

 Address:
 500 S.E. MIZNER BLVD. #111
 Address:
 10 WINDING RIDGE

 City-St-Zip:
 BOCA RATON, FL 33432 US
 City-St-Zip:
 CLIFTON, NY 12065 US

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 COOPER, BETSY MS.
 Name:
 GLOVER, SONIA MS.

 Address:
 P.O. BOX 765
 Address:
 4763 NW 114TH DR

City-St-Zip: BOCA RATON, FL 33429 US City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: TREA () Delete Title: () Change () Addition

 Name:
 RYAN, GEORGE W MR.
 Name:

 Address:
 3 NORTH CAYUGA STREET
 Address:

 City-St-Zip:
 UNION SPRINGS, NY 13160 US
 City-St-Zip:

Title: () Delete Title: EX D () Change (X) Addition Name: BRUBAKER, PATRICIA L MRS Address: Address: 798 ELM TREE LANE City-St-Zip: BOCA RATON, FL 33486

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: PATRICIA L. BRUBAKER EX D 03/30/2007