

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 07, 2007
Secretary of State

DOCUMENT# N05000010530

Entity Name: GO OUT AND LIVE SUCCESSFULLY, INC.**Current Principal Place of Business:**500 S.E. MIZNER BLVD.
#111
BOCA RATON, FL 33432 US**Current Mailing Address:**BOX 1406
BOCA RATON, FL 33429 US**New Principal Place of Business:**1200 NORTH FEDERAL HWY
200
BOCA RATON, FL 33432 US**New Mailing Address:**798 ELM TREE LANE
BOCA RATON, FL 33486 US**FEI Number:** 16-1551868**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BRUBAKER, PATRICIA L MRS
798 ELM TREE LANE
BOCA RATON, FL 33486 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: PRES () Delete
Name: RICHARDSON, ROBERT MR.
Address: 10 WINDING RIDGE
City-St-Zip: CLIFTON, NY 12065 USTitle: SEC () Delete
Name: GLOVER, SONIA MS.
Address: 4763 NW 114TH DR
City-St-Zip: CORAL SPRINGS, FL 33076 USTitle: TREA () Delete
Name: RYAN, GEORGE W MR.
Address: 3 NORTH CAYUGA STREET
City-St-Zip: UNION SPRINGS, NY 13160 USTitle: EX D () Delete
Name: BRUBAKER, PATRICIA L MRS
Address: 798 ELM TREE LANE
City-St-Zip: BOCA RATON, FL 33486**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: PATRICIA L BRUBAKER

MRS

05/07/2007

Electronic Signature of Signing Officer or Director

Date