2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010530

Current Principal Place of Business:

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address: City-St-Zip: BOCA RATON, FL 33486

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Entity Name: GO OUT AND LIVE SUCCESSFULLY, INC.

FILED Mar 07, 2008 Secretary of State

New Principal Place of Business:

1200 NORTH FEDERAL HWY				7040 W. PALMETTO PARK RD.		
200 BOCA RA	TON, FL 33432	US	4-679 BOCA RAT	TON, FL 33433	US	
Current Mailing Address:			New Maili	New Mailing Address:		
798 ELM TREE LANE BOCA RATON, FL 33486 US		405	6958 PALMETTO CIRCLE SOUTH 405 BOCA RATON, FL 33433 US			
FEI Number:	: 16-1551868 F	El Number Applied For () F	El Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of Curr	ent Registered Agent:	Name and	Name and Address of New Registered Agent:		
BRUBAKER, PATRICIA L MRS 798 ELM TREE LANE BOCA RATON, FL 33486 US			6958 PALM 405	BRUBAKER, PATRICIA L MRS 6958 PALMETTO CIRCLE SO 405 BOCA RATON, FL 33433 US		
	named entity sub e of Florida.	mits this statement for the purp	ose of changing i	ts registered off	ice or registered agent, or both,	
SIGNATURE: PATRICIA L. BRUBAKER				03/07/2008		
	Electronic S	Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PRES () Del RICHARDSON, ROI 10 WINDING RIDGI CLIFTON, NY 1206	BERT MR. E	Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address: City-St-Zip:	SEC () Del GLOVER, SONIA M 4763 NW 114TH DE CORAL SPRINGS,	1S. R	Title: Name: Address: City-St-Zip:	SEC (X) (MOSLEY-MOORI 234 DURFEE HIL ITHACA, NY 148	L RD.	
Title: Name: Address: City-St-Zip:	TREA () Del RYAN, GEORGE W 3 NORTH CAYUGA UNION SPRINGS, N	MR. STREET	Title: Name: Address: City-St-Zip:	TREA (X) O DELECLUYSE, S 500 SE MIZNER BOCA RATON, F		
Title: Name: Address:	EX D () Del BRUBAKER, PATRI 798 ELM TREE LAN	CIA L MRS	Title: Name: Address:	BRUBAKER, PAT	Change () Addition RICIA L MRS I CIRCLE SO. #405	

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.

City-St-Zip:

City-St-Zip:

Title:

Name: Address:

Title:

Name:

Address:

City-St-Zip:

BOCA RATON, FL 33433 US

CONSTANTINE, DAVID MR

BINGHAMTON, NY 13903 US

BRUBAKER, DEBORAH MS.

3144 HICKORY LANE

798 ELM TREE LANE BOCA RATON, FL 33486 US

() Change (X) Addition

() Change (X) Addition

SIGNATURE: PATRICIA L. BRUBAKER EX D 03/07/2008