

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000092

FILED  
Apr 14, 2006  
Secretary of State

Entity Name: I SPEAK L.I.F.E. GLOBAL MINISTRIES, INC.

**Current Principal Place of Business:**

5423 MARSALA LANE  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2503  
JACKSONVILLE, FL 32203

**New Mailing Address:**

FEI Number: 74-3157700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCALL, YAQUANDA PAYNE  
5423 MARSALA LANE  
JACKSONVILLE, FL 32244 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: PD ( ) Delete  
Name: MCCALL, YAQUANDA  
Address: 5423 MARSALA LANE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VD ( ) Delete  
Name: MCCALL, TOMMY  
Address: 5423 MARSALA LANE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD ( ) Delete  
Name: HOLMES, VANESSA  
Address: 12984 FOREST ACRE TRAIL  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: HAMILTON, LATANYA  
Address: 868 BUNKERHILL BLVD  
City-St-Zip: JACKSONVILLE, FL 32208

**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 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: YAQUANDA PAYNE MCCALL

PD

04/14/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date