2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000092

Apr 23, 2009 Secretary of State

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

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

3883 CAMERON CROSSING TALLAHASSEE, FL 32312

Current Mailing Address: New Mailing Address:

P.O. BOX 14167 TALLAHASSEE, FL 32317

FEI Number: 74-3157700 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:

MCCALL, YAQUANDA PAYNE PAYNE-MCCALL, YAQUANDA 3883 CAMERON CROSSING TALLAHASSEE, FL 32312 US PAYNE-MCCALL, YAQUANDA 3883 CAMERON CROSSING TALLAHASSEE, FL 32312 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: YAQUANDA PAYNE-MCCALL 04/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC () Delete Title: PDC (X) Change () Addition Name: MCCALL, YAQUANDA Name: PAYNE-MCCALL, YAQUANDA Address: 3883 CAMERON CROSSING Address: TALLAHASSEE, FL 32312 US City-St-Zip: TALLAHASSEE, FL 32312 US

Title: VD () Delete Title: () Change () Addition

 Name:
 MCCALL, TOMMY
 Name:

 Address:
 3883 CAMERON CROSSING
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312 US
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 WILLIAMS, VANESSA
 Name:

 Address:
 3222 MOUND DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309 US
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 GUARDIA, ANGELA
 Name:

 Address:
 9346 BOYKIN ROAD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32317 US
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SLADE, TERESA
 Name:

 Address:
 3108 HAWKS LANDING DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309 US
 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: YAQUANDA PAYNE-MCCALL PDC 04/23/2009

Electronic Signature of Signing Officer or Director

Date