2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007
Secretary of State

DOCUMENT# N06000009050

Entity Name: FREEDOM & LIFE GROUP, INTERNATIONAL, INC.

Current Principal Place of Business:

275 21ST AVE N.E.
ST. PETERSBURG, FL 33704

New Principal Place of Business:

Current Mailing Address:

275 21ST AVE N.E.
ST. PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 20-5406877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DESTOPPELAIRE, JUSTIN
275 21ST AVE N.E.
ST. PETERSBURG, FL 33704 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: DP ( ) Delete
Name: DESTOPPELAIRE, JUSTIN
Address: 275 21ST AVE N.E.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: DVP ( ) Delete
Name: STONER, ANDREW
Address: 11627 TIMBER RIDGER LANE
City-St-Zip: SHARONVILLE, OH 45241

Title: DS ( ) Delete
Name: DESTOPPELAIRE, G. MARISOL
Address: 275 21ST AVE N.E.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: DT ( ) Delete
Name: CONYERS, MARY
Address: 751 30TH AV S
City-St-Zip: ST. PETERSBURG, FL 33705

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: JUSTIN DESTOPPELAIRE DP 05/03/2007

Electronic Signature of Signing Officer or Director — Date