2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001540

Entity Name: GLOBAL LIFE MISSION, INC.

FILED Jan 03, 2008 Secretary of State

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

1855 WEST STATE ROAD 434 SUITE #222 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

1855 WEST STATE ROAD 434 SUITE #222 LONGWOOD, FL 32750

FEI Number: 33-1173597 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:

 SPIEGEL & UTRERA, P.A.
 SANTOS, ROSEMARY A

 1840 SW 22ND ST.
 1855 W. STATE ROAD 434

 4TH FLOOR
 222

 MIAMI, FL 33145 US
 LONGWOOD, FL 32750 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: ROSEMARY A. SANTOS 01/03/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PTD () Delete Title: PD (X) Change () Addition

Name: SANTOS, JOSE FELIPE Name: STEELE, JOHN L
Address: 1855 WEST STATE ROAD 434, SUITE #222 Address: 710 ARNOLD ST.

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VPSD () Delete Title: TD (X) Change () Addition

Name: SANTOS, ROSEMARY Name: SANTOS, ROSEMARY

Address: 1855 WEST STATE ROAD 434, SUITE #222 Address: 1855 WEST STATE ROAD 434, SUITE #222

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

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

Name: SCHRODER, JAMES JOSEPH Name: STEELE, KATHY J
Address: 1855 WEST STATE ROAD 434, SUITE #222 Address: 710 ARNOLD ST.

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

 Name:
 Name:
 VERGARA, ARIANA E

 Address:
 Address:
 109 STONEHEDGE CT.

 City-St-Zip:
 City-St-Zip:
 SANFORD, FL 32771

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: ROSEMARY A. SANTOS TD 01/03/2008