

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010098

Entity Name: PEOPLE INSPIRED, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

1920 BOOTHE CIRCLE, SUITE 110
LONGWOOD, FL 32750

New Principal Place of Business:

1620 TIMBER HILLS DRIVE
DELAND, FL 32724

Current Mailing Address:

1920 BOOTHE CIRCLE, SUITE 110
LONGWOOD, FL 32750

New Mailing Address:

1620 TIMBER HILLS DRIVE
DELAND, FL 32724

FEI Number: 26-1560628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: D () Delete
Name: HALL, JON M SR
Address: 1920 BOOTHE CIRCLE, SUITE 110
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: DYKES, SUSAN
Address: 1620 TIMBER HILLS DRIVE
City-St-Zip: DELAND, FL 32724

Title: D (X) Delete
Name: CARSON, KEITH
Address: 1554 N. RIDGE CIRCLE
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Delete
Name: HALL, JON M JR
Address: 211 ORANGE TERRACE DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Delete
Name: HALL, DAWN P
Address: 1590 GLENCOE ROAD
City-St-Zip: WINTER PARK, FL 327896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HALL, SUSAN
Address: 1620 TIMBER HILLS DRIVE
City-St-Zip: DELAND, FL 32724

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: SUSAN HALL

MRS

04/14/2009

Electronic Signature of Signing Officer or Director

Date