

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005969

FILED
Apr 14, 2009
Secretary of State

Entity Name: GLOBAL INSTITUTE FOR SCIENTIFIC THINKING, INC.

Current Principal Place of Business:

213 RIDGE ROAD
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

213 RIDGE ROAD
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 26-2842321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, CHARLES E
213 RIDGE ROAD
LAKE MARY, FL 32746 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: BAILEY, CHARLES E
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: BAILEY, ANGIE E
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: BAILEY, GINA M
Address: 126 CLUB RD
City-St-Zip: SANFORD, FL 32771

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BAILEY, CHARLES E DR
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: SEC (X) Change () Addition
Name: MILLER, NORA
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: TREA (X) Change () Addition
Name: BAILEY, GINA M
Address: 126 CLUB RD
City-St-Zip: SANFORD, FL 32771

Title: BM () Change (X) Addition
Name: STOCKDALE, STEVE
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: BM () Change (X) Addition
Name: BONE, MIKE DR
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: BM () Change (X) Addition
Name: JOHNSON, ANDREA
Address: 213 RIDGE ROAD
City-St-Zip: LAKE MARY, FL 32746

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: DR. CHARLES E BAILEY

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date