

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008803

FILED
Jan 06, 2009
Secretary of State

Entity Name: THE GOOD EARTHKEEPING PROJECT, INC.

Current Principal Place of Business:

5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653

New Principal Place of Business:

5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653 US

Current Mailing Address:

5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653

New Mailing Address:

5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653 US

FEI Number: 26-3965021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALING, JOHN
5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

PALING, JOHN E
5822 N. W. 91ST BOULEVARD
GAINESVILLE, FL 32653 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: JOHN PALING

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PALING, JOHN
Address: 5822 N. W. 91ST BOULEVARD
City-St-Zip: GAINESVILLE, FL 32653

Title: DV () Delete
Name: CLARK, DANIEL C
Address: 301 S.E. 4TH AVENUE, STATION 112
City-St-Zip: GAINESVILLE, FL 32601

Title: DS () Delete
Name: MACKENZIE, MICKIE
Address: 519 N.E. 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: T () Delete
Name: ANUSAVICE, ELLIE
Address: 5822 N. W. 91ST BOULEVARD
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: PALING, JOHN
Address: 5822 N. W. 91ST BOULEVARD
City-St-Zip: GAINESVILLE, FL 32653

Title: VP (X) Change () Addition
Name: CLARK, DANIEL C
Address: 301 S.E. 4TH AVENUE, STATION 112
City-St-Zip: GAINESVILLE, FL 32601

Title: DS (X) Change () Addition
Name: MACKENZIE, MICKIE
Address: 224 NW 2ND AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: T (X) Change () Addition
Name: ANUSAVICE, ELLIE
Address: 520 W NEWBERRY ROAD
City-St-Zip: GAINESVILLE, FL 32607

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: JOHN PALING

PRES

01/06/2009

Electronic Signature of Signing Officer or Director

Date