

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009270

FILED
Mar 16, 2009
Secretary of State

Entity Name: GIVING FORWARD WITH INTEGRITY, INC.

Current Principal Place of Business:

7870 SW 103RD STREET ROAD SUITE 201
OCALA, FL 34476

New Principal Place of Business:

Current Mailing Address:

7870 SW 103RD STREET ROAD SUITE 201
OCALA, FL 34476

New Mailing Address:

FEI Number: 30-0506427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHREWSBURY, FRANCIS L CPA
21525 TRUMPETER DR
LAND O LAKES, FL 346394449 US

Name and Address of New Registered Agent:

MITCHELL, RICHARD
7870 SW 103RD STREET ROAD
SUITE 201
OCALA, FL 34476 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: RICHARD MITCHELL

03/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAMSON, KIM
Address: 7860 SW 103RD STREET ROAD SUITE 101
City-St-Zip: Ocala, FL 34476

Title: D () Delete
Name: HARSANYL, SHARON
Address: 7860 SW 103RD STREET ROAD SUITE 101
City-St-Zip: Ocala, FL 34476

Title: D () Delete
Name: LEE, KENNETH
Address: 7860 SW 103RD STREET ROAD SUITE 101
City-St-Zip: Ocala, FL 34476

Title: D () Delete
Name: PHILLIPS, DENNIS
Address: 7860 SW 103RD STREET ROAD SUITE 101
City-St-Zip: Ocala, FL 34476

Title: D () Delete
Name: SCOTTI, KENDRA
Address: 7860 SW 103RD STREET ROAD SUITE 101
City-St-Zip: Ocala, FL 34476

Title: D () Delete
Name: MITCHELL, RICHARD J
Address: 13351 NW 198TH STREET ROAD
City-St-Zip: MICANOPY, FL 32667

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:

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: RICHARD MITCHELL

D

03/16/2009

Electronic Signature of Signing Officer or Director

Date