

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010747

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** ONE POSITIVE PLACE, INC.

**Current Principal Place of Business:**

1802 FLOWER AVENUE  
APT. J101  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 203  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 37-1595973      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JACKSON, ROBERT C ESQ.  
304 MAGNOLIA AVENUE  
PANAMA CITY, FL 32401 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, P  
Name: FOREHAND, KELLY  
Address: 308 MEADOWOOD COURT  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D, V  
Name: ASHLEY, LISA P  
Address: P.O. BOX 9884  
City-St-Zip: PANAMA CITY BEACH, FL 32417 US

Title: D  
Name: KINARD, MICHELLE  
Address: 1607 INVERNESS ROAD  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D  
Name: GAINER, TERRI  
Address: 3002 E. THIRD STREET  
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D, T  
Name: GALBREATH, STACIE  
Address: 13920 ASHTON WAY  
City-St-Zip: PANAMA CITY, FL 32409 US

Title: D, S  
Name: LYON, ANN  
Address: 2103 CORAL DRIVE  
City-St-Zip: LYNN HAVEN, FL 32444 US

I hereby 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 all other like empowered.

SIGNATURE: STACIE GALBREATH

D, T

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date