2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010747

Entity Name: ONE POSITIVE PLACE, INC.

FILED Mar 29, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1802 FLOWER AVENUE 1804 FLOWER AVENUE

APT. J101 PANAMA CITY, FL 32405 US PANAMA CITY, FL 32405 US

Current Mailing Address: New Mailing Address:

P.O. BOX 203

LYNN HAVEN, FL 32444 US

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

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

JACKSON, ROBERT C 304 MAGNOLIA AVENUE PANAMA CITY, FL 32401 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:

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: [

Name: GAINER, TERRI

Address: 3002 E. THIRD STREET
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D,

 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 T 03/29/2011