2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N09779

Entity Name: GOOD SPIRIT FOUNDATION, INC.

Current Principal Place of Business:

5151 E. STOKES FERRY ROAD
HERNANDO, FL 34442 US

New Principal Place of Business:

Current Mailing Address:

5151 E. STOKES FERRY ROAD
HERNANDO, FL 34442 US

New Mailing Address:

FEI Number: 59-2611871 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESSER, ED
5151 E. STOKES FERRY ROAD
HERNANDO, FL 34442 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:	DT	( ) Delete
Name:	SIMMONS, STEPHEN K	
Address:	38 S HAID TERRACE	
City-St-Zip:	LECANTO, FL 34461	
Title:	DT	(X) Delete
Name:	DINGLER, DENNY	
Address:	211 S. APOPKA	
City-St-Zip:	INVERNESS, FL 34452	
Title:	DT	( ) Delete
Name:	SIMS, RICHARD G	
Address:	1559 E. GLENWOOD LANE	
City-St-Zip:	HERNANDO, FL 34442	
Title:	DT	( ) Delete
Name:	BRIMER, DAVID N	
Address:	P.O. BOX 822	
City-St-Zip:	ARIPEKA, FL 34679	
Title:	DT	( ) Delete
Name:	COHEN, ANNETTE	
Address:	9770 SW 121ST TERRACE	
City-St-Zip:	DUNNELLON, FL 34432	

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:	

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: ED MESSER RA 01/26/2009

Electronic Signature of Signing Officer or Director — Date