2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003837

Entity Name: GOINGS, INC.

FILED Aug 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 312 HUNTERS CROSSING CARY, NC 27518 **Current Mailing Address: New Mailing Address:** C/O CHRISTIAN ROEHM 2320 BUCKSTONE COURT FUQUAY-VARINA, NC 27526 US FEI Number: 59-3335537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BULLOCK, DAVID 5331 SW 7TH AVENUE OCALA, FL 34474 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition THOMAS, STEVE WELLS, CALEB Name: Name: 161 SUSAN DR. Address: 1763-B LAWRENCE RD. Address: City-St-Zip: GARNER, NC 27529 US City-St-Zip: KAILUA, HI 96734 US Title: () Delete Title: (X) Change () Addition JAMES, ROBERT M Name: WELLS, JOSHUA Name: Address: 120 BRAXBERRY WAY Address: 9606 N. ROYAL CREST CT. City-St-Zip: HOLLY SPRINGS, NC 27540 US City-St-Zip: FREDERICKSBURG, VA 22408 US Title: () Delete Title: (X) Change () Addition MCNEELY, GREG WELLS, JENNIFER Name: Name: 107 DORCESTER COURT 312 HUNTERS CROSSING Address: Address: City-St-Zip: **CARY, NC 27511 US** City-St-Zip: CARY, NC 27511 US (X) Change () Addition Title: () Delete Title: POLK, DOUĞ Name: Name: WELLS, MICHELLE 405 OAKRIDGE ROAD Address: Address: 9606 N. ROYAL CREST CT. City-St-Zip: CARY, NC 27511 US City-St-Zip: FREDERICKSBURG, NC 22408 US Title: Title: () Delete () Change () Addition WELLS, TOM Name: Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

SIGNATURE: TOM WELLS P 08/08/2008

312 HUNTERS CROSSING

2320 BUCKSTONE COURT

() Delete

FUQUAY VARINA, NC 27526 US

CARY, NC 27511

ROEHM, NORA

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

(X) Change () Addition

DAVID, BULLOCK

5331 SW 7TH AVENUE

OCALA, FL 34474 US