

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058844

Entity Name: GLOBAL LENDING GROUP, INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

2561 NURSERY ROAD
SUITE C
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

2561 NURSERY ROAD
SUITE C
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-3721780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOULTON, JUSTIN
1645 BELLROSE DR, NORTH
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

MOULTON, JUSTIN
13596 TRADITIONS DR
SEMINOLE, FL 33776 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: JUSTIN MOULTON

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOULTON, JUSTIN
Address: 1645 BELLROSE DR, NORTH
City-St-Zip: CLEARWATER, FL 33756

Title: SD () Delete
Name: MOULTON, JUSTIN
Address: 1645 BELLROSE DR, NORTH
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOULTON, JUSTIN
Address: 13596 TRADITIONS DR
City-St-Zip: SEMINOLE, FL 33776

Title: SD (X) Change () Addition
Name: MOULTON, JUSTIN
Address: 13596 TRADITIONS DR
City-St-Zip: SEMINOLE, FL 33776

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUSTIN MOULTON

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date