2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114111

Entity Name: GETTING STARTED INC

FILED Apr 10, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

9290 COLLEGE PARKWAY UNIT 2 FORT MYERS, FL 33919

Current Mailing Address: New Mailing Address:

9290 COLLEGE PARKWAY UNIT 2 FORT MYERS, FL 33919

FEI Number: 04-3720559 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:

BRISKY, CAROL A

15208 BAHIA CT

FORT MYERS, FL 33908 US

FITZGERALD, SHEELAGH L

550 PECK AVENUE

FORT MYERS, FL 33919 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: SHEELAGH L FITZGERALD 04/10/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FITZGERALD, SHEELAGH Name: Name: FITZGERALD, SHEELAGH 550 PECK AVENUE 550 PECK AVENUE Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

 Name:
 FITZGERALD, MICHAEL
 Name:

 Address:
 550 PECK AVENUE
 Address:

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 BRISKY, CAROL A SECY
 Name:

 Address:
 15208 BAHIA CT
 Address:

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHEELAGH L FITZGERALD PD 04/10/2007