

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058377

FILED  
Jul 03, 2006  
Secretary of State

Entity Name: GOD MADE IT POSSIBLE, INC

## Current Principal Place of Business:

9362 LOCKHEED LANE  
JACKSONVILLE, FL 32221 US

## New Principal Place of Business:

## Current Mailing Address:

9362 LOCKHEED LANE  
JACKSONVILLE, FL 32221 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, AL J  
9362 LOCKHEED LANE  
JACKSONVILLE, FL 32221 US

## Name and Address of New Registered Agent:

DAVIS, ANGELEE  
9362 LOCKHEED LANE  
JACKSONVILLE, FL 32221 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: ANGELEE DAVIS

07/03/2006

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: D ( ) Delete  
Name: ROBINSON, AL J  
Address: P.O. BOX 26886  
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: VP ( ) Delete  
Name: DAVIS, ANGELEE  
Address: 9362 LOCKHEED LANE  
City-St-Zip: JACKSONVILLE, FL 32221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DAVIS, ANGELEE  
Address: P.O. BOX 26886  
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: VP (X) Change ( ) Addition  
Name: ROBINSON, ALEX J  
Address: 9362 LOCKHEED LANE  
City-St-Zip: JACKSONVILLE, FL 32221

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: ANGELEE DAVIS

CEO

07/03/2006

Electronic Signature of Signing Officer or Director

Date