

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021154

FILED
Jul 10, 2008
Secretary of State

Entity Name: GOODBYE FORECLOSURE, INC

Current Principal Place of Business:

1158 SOLANA AVE
WINTER PARK, FL 32789

New Principal Place of Business:

210 N KIRKMAN RD
ORLANDO, FL 32811

Current Mailing Address:

1158 SOLANA AVE
WINTER PARK, FL 32789

New Mailing Address:

210 N KIRKMAN RD
ORLANDO, FL 32811

FEI Number: 73-1727443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVEL, MALCOLM
1158 SOLANA AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

RIVEL, MALCOLM
210 N KIRKMAN RD
ORLANDO, FL 32811 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:

07/10/2008

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: P () Delete
Name: RIVEL, MALCOLM
Address: 1158 SOLANA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete
Name: HERSCHBERG, ADOLFO A
Address: 1158 SOLANA AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVEL, MALCOLM
Address: 210 N KIRKMAN RD
City-St-Zip: ORLANDO, FL 32811

Title: VP (X) Change () Addition
Name: HERSCHBERG, ADOLFO A
Address: 210 N KIRKMAN RD
City-St-Zip: ORLANDO, FL 32811

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: MALCOLM RIVEL

P

07/10/2008

Electronic Signature of Signing Officer or Director

Date