2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129816

Entity Name: GLEN EAGLE INVESTMENT GROUP, INC.

FILED Jan 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1620 EAGLE NEST CIR WINTER SPRINGS, FL 32708 **Current Mailing Address: New Mailing Address:** 969 CROSS CUT WAY LONGWOOD, FL 32750 FEI Number: 20-3504159 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: DETMER, DAVID A TREASUR 969 CROSS CUT WAY LONGWOOD, FL 32750 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MCLEMORE, RONALD W Name: Name: 1620 EAGLE NEST CIRCLE Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DETMER, DAVID A Name: 969 CROSS CUT WAY Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: () Delete Title: Title: () Change () Addition SANDERS, WILLIAM A Name: Name: 6078 ZION CT Address: Address: City-St-Zip: CASTLE ROCK, CO 80109 City-St-Zip: Title: () Delete Title: () Change () Addition BOBEK, MARTIN A Name: Name: Address: 5335 CAMBRIDGE DR Address: City-St-Zip: BEAUMONT, TX 77707 City-St-Zip: Title: Title: () Delete () Change () Addition STINSON, THOMAS L Name: Name: 3980 N MAJOR DR APT 1013 Address: Address:

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.

City-St-Zip:

SIGNATURE: DAVID A DETMER T 01/11/2009

City-St-Zip:

BEAUMONT, TX 77713