

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 29, 2008 08:00 A
Secretary of State

DOCUMENT # P06000132762

1. Entity Name
GOAL ONE, INC.



Principal Place of Business
**3070 WATER OAK DRIVE
MERRITT ISLAND, FL 32953**

Mailing Address
**3070 WATER OAK DRIVE
MERRITT ISLAND, FL 32953**



02152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5732349	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**KENNEDY, ROBERT J
3070 WATER OAK DRIVE
MERRITT ISLAND, FL 32953**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000843575
03/12/08-80001-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KENNEDY, ROBERT J
STREET ADDRESS	3070 WATER OAK DRIVE
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	VP
NAME	KENNEDY, SHAWN M
STREET ADDRESS	849 STARLIGHT CAVE ROAD, APT. 102
CITY-ST-ZIP	ORLANDO, FL 32828
TITLE	SEC
NAME	KENNEDY, SCOTT P
STREET ADDRESS	12833 GRAND BANKS LANE
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

25 FEB '08

Date

Daytime Phone #