



2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000132762 1. Entity Name GOAL ONE, INC.	
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Principal Place of Business 3070 WATER OAK DRIVE MERRITT ISLAND, FL 32953	Mailing Address 3070 WATER OAK DRIVE MERRITT ISLAND, FL 32953
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DO NOT WRITE IN THIS SPACE

FILED
09 MAY 13 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02152008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-5732349	Applied For 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
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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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KENNEDY, ROBERT J 3070 WATER OAK DRIVE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KENNEDY, SHAWN M 848 STARLIGHT CAVE ROAD, APT. 102 ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC KENNEDY, SCOTT P 12833 GRAND BANKS LANE ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY - ST - ZIP	\$75/14
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

100155899211
05/13/09--01034--013 **150.00

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: 	18 Apr 09 321-453-5966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Daytime Phone #