

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005169

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: LIFE-LINE EMERGENCY VEHICLES, INCORPORATED

**Current Principal Place of Business:**

1 LIFE-LINE DRIVE  
SUMNER, IA 50674

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 299  
SUMNER, IA 50674

**New Mailing Address:**

FEI Number: 41-1528099      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

TEN-8 FIRE EQUIPMENT, INC.  
2904 59TH AVE. DR E  
BRANDENTON, FL 34203      US

**Name and Address of New Registered Agent:**

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:**

Title: P ( ) Delete  
Name: LEICHER, TERRY  
Address: 201 N. RAILROAD ST  
City-St-Zip: SUMNER, IA 50674

Title: V ( ) Delete  
Name: LEICHER, CONNIE  
Address: 201 N. RAILROAD ST  
City-St-Zip: SUMNER, IA 50674

Title: ST ( ) Delete  
Name: BECKER, PEGGY  
Address: 401 CORKEY DR  
City-St-Zip: SUMNER, IA 50674

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TERRY LEICHER

P

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date