2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N00000000793

Entity Name: HEALTH AND LIFE EDUCATIONAL ENTERPRISES, INC.

Current Principal Place of Business:

313 CANTERBURY DR W
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

P O BOX 3942
WEST PALM BEACH, FL 33402

New Mailing Address:

313 CANTERBURY DR W
WEST PALM BEACH, FL 33407

FEI Number: 65-0970845 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSE, TERRI
313 CANTERBURY DRIVE WEST
WEST PALM BEACH, FL 33407 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROSE, TERRI
Address: 313 CANTERBURY DR W
City-St-Zip: LAKE WORTH, FL 33407

Title: S ( ) Delete
Name: GRIMES, MELANIE
Address: 3946 OAK PL
City-St-Zip: DOUGLASVILLE, GA 30135

Title: T ( ) Delete
Name: BRINSON, DEIDRA
Address: 104 RIVIERA AVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: BLOCKSON, CARLA
Address: 1802 PIERCE DR
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: MITCHELL, TERRI
Address: 405 GREENBRIAR DRIVE
City-St-Zip: LAKE PARK, FL 33403

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI ROSE PRES 04/28/2009

Electronic Signature of Signing Officer or Director — Date