

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 30, 2008  
Secretary of State

DOCUMENT# N03000000049

Entity Name: BALLERS "4" LIFE, INC.

**Current Principal Place of Business:**

7435 SUNNY HILL TERRACE  
LANTANA, FL 33462 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1184  
BOYNTON BEACH, FL 33425 US

**New Mailing Address:**

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

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

GUY, FELIX E  
1280 WEST 3RD STREET  
RIVIERA BEACH, FL 33404 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: S ( ) Delete  
Name: BUTTS, RUTH L  
Address: 4995 SABLE PINE CIRCLE #B-2  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: V P ( ) Delete  
Name: HAYNES, THOMAS  
Address: 712 PLACE TAVANT  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: T ( ) Delete  
Name: GILLIAM, KATIE D  
Address: 7435 SUNNY HILL TERRACE  
City-St-Zip: LANTANA, FL 33462 US

Title: P ( ) Delete  
Name: GILLIAM, WYNDELL  
Address: 7435 SUNNY HILL TERRACE  
City-St-Zip: LANTANA, FL 33462 US

Title: CT ( ) Delete  
Name: SMITH, ROCHELLE  
Address: 907 PINE CIRCLE  
City-St-Zip: GREENACRES, FL 33463 US

**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:

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

SIGNATURE: KATIE D GILLIAM

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date