2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# N05000008187

Entity Name: LIFE'S CHOICES OF LAKE COUNTY, INC.

Current Principal Place of Business:

201 FLORAL AVE. EAST
EUSTIS, FL 32726

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2390
UMATILLA, FL 32784

New Mailing Address:

201 FLORAL AVE EAST
EUSTIS, FL 32726

FEI Number: 86-1146587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARRILLO, KATHY
17250 SE 260 AVE. RD.
UMATILLA, FL 32784 US

Name and Address of New Registered Agent:

BRASWELL, CYNTHIA L
16146 LONELY LANE
UMATILLA, FL 32784 US

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: CYNTHIA L. BRASWELL 03/17/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: BC ( ) Delete
Name: CARRILLO, KATHY
Address: 17250 SE 260 AVE. RD.
City-St-Zip: UMATILLA, FL 32787

Title: S ( ) Delete
Name: JENKINS, SUZAN
Address: 910 PINE MEADOWS
City-St-Zip: EUSTIS, FL 32726

Title: T ( ) Delete
Name: BRASWELL, CINDY
Address: 21923 LAKE SENECA RD
City-St-Zip: EUSTIS, FL 32736

Title: S (X) Delete
Name: SPANN, DINA R
Address: 22953 WILL MURPHY RD.
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: BRASWELL, CYNTHIA L
Address: 16146 LONELY LANE
City-St-Zip: UMATILLA, FL 32784

Title: S (X) Change ( ) Addition
Name: VERKAIK, VICKI
Address: 54 OHIO BLVD
City-St-Zip: EUSTIS, FL 32726

Title: T (X) Change ( ) Addition
Name: BRASWELL, CINDY
Address: 16146 LONELY LANE
City-St-Zip: UMATILLA, FL 32784

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: CYNTHIA L BRASWELL PT 03/17/2009
Electronic Signature of Signing Officer or Director Date