

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012232

FILED
Feb 27, 2010
Secretary of State

Entity Name: LIFELONG LEARNING INSTITUTE, INC.

Current Principal Place of Business:

26300 AIRPORT ROAD
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 510849
PUNTA GORDA, FL 339510849

New Mailing Address:

FEI Number: 20-8241134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, ALBERT R
101 GOLD TREE
PUNTA GORDA, FL 33955 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
Name: BROX, CHARLES JR.
Address: 149 CRESCENT DR.
City-St-Zip: PUNTA GORDA, FL 33950

Title: V
Name: PHILLIPS, JOHN
Address: 6800 GOLF COURSE BLVD. F-59
City-St-Zip: PUNTA GORDA, FL 33982

Title: S
Name: MCCORMACK, EILEEN
Address: 29517 TURBAK DR.
City-St-Zip: PUNTA GORDA, FL 33982

Title: T
Name: CHAPMAN, ALBERT R
Address: 101 GOLD TREE
City-St-Zip: PUNTA GORDA, FL 33955

Title: D
Name: REYNOLDS, JAMIE
Address: 3234 CEDARBROOK DR.
City-St-Zip: PUNTA GORDA, FL 33982

I hereby 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 all other like empowered.

SIGNATURE: ALBERT R. CHAPMAN

MR.

02/27/2010

Electronic Signature of Signing Officer or Director

Date