

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 20, 2009  
Secretary of State

DOCUMENT# N17966

Entity Name: CITY OF LIFE, INC.

**Current Principal Place of Business:**

2874 E IRLO BRONSON  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

2874 E IRLO BRONSON  
KISSIMMEE, FL 34744 US

**New Mailing Address:**

FEI Number: 59-2720045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, GARY  
2874 E. IRLO BRONSON HIGHWAY  
KISSIMMEE, FL 32742 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: PD ( ) Delete  
Name: SMITH, GARY A  
Address: 4241 KISSIMMEE PARK RD  
City-St-Zip: ST CLOUD, FL 34772

Title: SD ( ) Delete  
Name: SMITH, JANIS K  
Address: 4241 KISSIMMEE PARK RD  
City-St-Zip: SAINT CLOUD, FL 34772

Title: D ( ) Delete  
Name: SMITH, JEFFREY  
Address: 2204 JESSICA LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete  
Name: WILKER, JOHN  
Address: 2616 FLORENCE DR.  
City-St-Zip: KISSIMMEE, FL 34744

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

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

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

Title: D (X) Change ( ) Addition  
Name: SMITH, JEFFREY  
Address: 3341 BUCKINGHAM WAY  
City-St-Zip: ST. CLOUD, FL 34772

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: GARY A SMITH

PD

02/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date