

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48593

FILED  
Jul 11, 2008  
Secretary of State

Entity Name: FRIENDS OF MORSELIFE, INC.

## Current Principal Place of Business:

4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417

## New Principal Place of Business:

## Current Mailing Address:

4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417

## New Mailing Address:

FEI Number: 85-0329966      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

FUNK, MORRIS S  
4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417      US

## Name and Address of New Registered Agent:

MYERS, KEITH A  
4847 FRED GLADSTONE DRIVE  
WEST PALM BEACH, FL 33417      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: KEITH A. MYERS

07/11/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FALK, ELLEN S  
Address: 113 WINDWARD DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D ( ) Delete  
Name: SRIBERG, TERRI  
Address: 19 JAMES DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T ( ) Delete  
Name: BERGEL, MIMI  
Address: 2883 CALAIS DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP ( ) Delete  
Name: AGRAN, MARJORIE  
Address: 119B PALM POINT CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D ( ) Delete  
Name: GREENBAUM, CAROL N  
Address: 235 GARDEN ROAD  
City-St-Zip: PALM BEACH, FL 33480

Title: VP ( ) Delete  
Name: SIDEL, BARBARA  
Address: 13780 PARC DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## 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:

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: KEITH A. MYERS

CEO

07/11/2008

Electronic Signature of Signing Officer or Director

Date