

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000793

Entity Name: HEALTH AND LIFE EDUCATIONAL ENTERPRISES, INC.**Current Principal Place of Business:**313 CANTERBURY DR WEST
WEST PALM BEACH, FL 33407**Current Mailing Address:**313 CANTERBURY DR WEST
WEST PALM BEACH, FL 33407**FEI Number:** 65-0970845**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ROSE, TERRI
313 CANTERBURY DRIVE WEST
WEST PALM BEACH, FL 33407 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name CUNNINGHAM-ROSE, TERRI M MS
Address 313 CANTERBURY DRIVE WEST
City-State-Zip: WEST PALM BEACH FL 33407

Title S
Name ROSE, MERIDITH M MS
Address 700 VIA ROYALE APT. 704
City-State-Zip: PALM BEACH GARDENS FL 33458

Title D
Name JOHNSON, ARTHUR
Address 8870 OLDHAM WAY
City-State-Zip: WEST PALM BEACH FL 33412

Title D
Name SMITH, CHALONDA MS
Address 7069 HILLCREST CHASE LANE
City-State-Zip: ANSTELL, GA 30168

Title D
Name ROSE, KEITH JR.
Address 3116 47TH STREET APT. 1
City-State-Zip: ASTORIA NY 11103

Title D
Name CHECHETTE, KRISTY MRS
Address 5475 NORTH WEST 49TH COURT
City-State-Zip: COCONUT CREEK FL 33073

Title D
Name ALVAREZ, NATALIE M MRS.
Address 840 US HIGHWAY ONE
City-State-Zip: NORTH PALM BEACH FL 33408

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: TERRI M CUNNINGHAM-ROSE

CEO

04/27/2013

Electronic Signature of Signing Officer/Director Detail

Date