

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000793

**Entity Name:** HEALTH AND LIFE EDUCATIONAL ENTERPRISES, INC.

**Current Principal Place of Business:**

4440 PGA BOULEVARD SUITE 600  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4440 PGA BOULEVARD SUITE 600  
PALM BEACH GARDENS, FL 33410 US

**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 ROSE, TERRI M MS  
Address 313 CANTERBURY DRIVE WEST  
City-State-Zip: WEST PALM BEACH FL 33407

Title TREASURER  
Name ROSE, TERRI M  
Address 313 CANTERBURY DR WEST  
City-State-Zip: WEST PALM BEACH FL 33407

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

*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 ROSE

**EXECUTIVE DIRECTOR**

**04/15/2019**

Electronic Signature of Signing Officer/Director Detail

Date