2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005905

Entity Name: CENTER OF LIFE, INC.

Current Principal Place of Business:

59 KATHLEEN TRAIL PALM COAST. FL 32164

Current Mailing Address:

59 KATHLEEN TRAIL

PALM COAST. FL 32164 US

FEI Number: 59-3419102 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEVITA, DIANA F 59 KATHLEEN TRAIL PALM COAST, FL 32164 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

Date

FILED Apr 13, 2015

Secretary of State

CC3778367919

Officer/Director Detail:

Title **TRUSTEE** Title **TRUSTEE** DEVITA, DIANA F Name MARIA, GIOIA Name Address 59 KATHLEEN TRAIL Address 41 LEE DRIVE

City-State-Zip: PALM COAST FL 32164 City-State-Zip: PALM COAST FL 32137

Title **TRUSTEE** Title TRUSTEE

Name PALMIERI, MARYANN G. LAWRENCE, DENISE B Name Address 32 BRUNETTE LANE Address 61 KATHLEEN TRAIL PALM COAST FL 32137 City-State-Zip: City-State-Zip: PALM COAST FL 32164

TRUSTEE Title

DUNBAR, ZOE A. Name 5300 MACASAET ST. Address

City-State-Zip: PUERTO PRINCESA CITY PALAWAN

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.

04/13/2015 SIGNATURE: DIANA F. DEVITA TRUSTEE