## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#731470** 

Entity Name: ETERNITY INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
7704 GRAY MOSS LN TAMPA, FL 336194204				10819 109TH STREET NORTH LARGO, FL 33778		
Current Mailing Address:				New Mailing Address:		
7704 GRAY MOSS LN TAMPA, FL 336194204				10819 109TH STREET NORTH LARGO, FL 33778		
FEI Number:	59-1566891	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and Address	of New Registered Agent:	
SMITH, OLGA O RA 7704 GRAY MOSS LN TAMPA, FL 33619 US				GREESON, GENE MR 10819 109TH STREET NORTH LARGO, FL 33778 US		
The above in the State	named entity s of Florida.	submits this statement for the pu	ırpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATURE: GENE GREESON					04/30/2008	
	Electron	ic Signature of Registered Ager	nt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () MATTHEWS, BO 714 MILLPOND SUGAR LAND,	DR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SMITH, W.T. 115 HIDDEN OA KINGSLAND, TX			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () ALESSI, VICKI 5 WESTVIEW E ROUND ROCK,	DR .		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () WOUGHTER, Jo 7007 CREEK F KILLEEN, TX 7	PLACE DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JONES, RICK 1182 CHAMBO HOUSTON, TX			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COX, BENNY R 1009 PEBBLE E CEDAR PARK,	BROOK DR		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: VICKI ALESSI PRES 04/30/2008