

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 23, 2009  
Secretary of State

DOCUMENT# 732402

Entity Name: FRIENDS FOR LIFE, INC.

**Current Principal Place of Business:**

C/O LEO PLATZ  
5410 BANYAN LANE  
TAMARAC, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LEO PLATZ  
5410 BANYAN LANE  
TAMARAC, FL 33319 US

**New Mailing Address:**

FEI Number: 23-7422280      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRAD, PATTE  
5903 B BEACH PLACE  
TAMARAC, FL 33319 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BERKOWITZ, FREIDA  
Address: 6607 NW 73 AVE  
City-St-Zip: TAMARAC, FL 33319 US

Title: P ( ) Delete  
Name: KAPLAN, LEO  
Address: 5310 BUTTONWOOD COURT  
City-St-Zip: TAMARAC, FL 33319 US

Title: DT ( ) Delete  
Name: PLATZ, LEO  
Address: 5410 BANYAN LN  
City-St-Zip: TAMARAC, FL 33319 US

Title: S ( ) Delete  
Name: BENNENFELD, RUCH  
Address: 5904 BREADFRUIT CIR  
City-St-Zip: FORT LAUDERDALE, FL 33319 US

Title: EPD ( ) Delete  
Name: FELDMAN, HARRY  
Address: 5305 WOODLANDS BLVD  
City-St-Zip: TAMARAC, FL 33319 US

Title: P ( ) Delete  
Name: ALKINGRAD, PATTIE  
Address: 5903 BLUE BEACH PLACE  
City-St-Zip: TAMARAC, FL 33319 US

**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: LEO PLATZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TREA

04/23/2009

\_\_\_\_\_  
Date