

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738382

FILED
Apr 14, 2011
Secretary of State

Entity Name: LIFE EXTENSION FOUNDATION, INC.

Current Principal Place of Business:

1100 WEST COMMERCIAL BLVD
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

1100 WEST COMMERCIAL BLVD
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 59-1746396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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
Name: FALOON, WILLIAM
Address: 1100 WEST COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D
Name: KENT, SAUL
Address: 1100 WEST COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DST
Name: BROWN, KEVIN
Address: 1100 WEST COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DP
Name: EYTCHISON, TINA
Address: 1100 WEST COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: AT
Name: GILNER, PAUL
Address: 1100 WEST COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

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: PAUL GILNER

AT

04/14/2011

Electronic Signature of Signing Officer or Director

Date