

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90062 032 ****61.25

DOCUMENT # 755607

1. Entity Name
LIFE ENRICHMENT CENTER, INC.



Principal Place of Business
**9704 NORTH BOULEVARD
TAMPA, FL 33612**

Mailing Address
**9704 NORTH BOULEVARD
TAMPA, FL 33612**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2108128

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MATCALF, RONNA J
2401 BAYSHORE BLVD 207
TAMPA, FL 33629**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate.)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BUBLEY, MARTIN
3820 NORTHDAL BLVD
TAMPA, FL 33624** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
COS, ELIZABETH
18608 WINDSOR PARK AVENUE
LUTZ, FL 33547** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T/D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
DOWNING, MARK
702 NORTH FRANKLIN ST
TAMPA, FL 33602** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HEYWOOD, TURNER A
11108 CARROLLWOOD DR
TAMPA, FL 33618** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MOBERG, MARK
3114 WEST HAVTHORNE ROAD
TAMPA, FL 33606** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
CHASTAIN, ZANITA
7542 TERRACE RIVER DRIVE
TAMPA, FL 33637** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S/D ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronna J. Metcalf, Executive Director 2/28/06 813/932-0241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

#1.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

ATTACHMENT

TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	T.J. Couch, Jr.		
STREET ADDRESS	1717 East Fowler Avenue		
CITY-ST-ZIP	Tampa, Florida 33612	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Charles Miranda		
STREET ADDRESS	22918 West Lake Avenue		
CITY-ST-ZIP	Tampa, Florida 33607	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Mary McGaughy		
STREET ADDRESS	2504 W Tennessee		
CITY-ST-ZIP	Tampa, Florida 33629	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Sgt. Lisa Dubord		
STREET ADDRESS	P.O. Box 747		
CITY-ST-ZIP	Thonotossa, Fl. 33592	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	V/D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Jan Platt		
STREET ADDRESS	3531 Village Way		
CITY-ST-ZIP	Tampa, Florida 33629		

#755607

40029025

D X
 Bill Bargren
 725 South Brevard Avenue
 Tampa, Florida 33606

D X
 Rick Nardelli
 7327 Egypt Lake Drive
 Tampa, Florida 33614