

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004696

FILED
May 08, 2008
Secretary of State

Entity Name: RMS LIFELINE INC.

Current Principal Place of Business:

601 HAWAII STREET
EL SEGUNDO, CA 90245 US

New Principal Place of Business:

Current Mailing Address:

601 HAWAII STREET
EL SEGUNDO, CA 90245 US

New Mailing Address:

FEI Number: 36-4258607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DGM () Delete
Name: NEE, RICHARD
Address: THREE HAWTHORNE PARKWAY, STE. 410
City-St-Zip: VERNON HILLS, IL 60061

Title: DCEO () Delete
Name: THIRY, KENT J CHAIRMA
Address: 601 HAWAII STREET
City-St-Zip: EL SEGUNDO, CA 90245

Title: DCOO () Delete
Name: MELLO, JOSEPH C
Address: 601 HAWAII STREET
City-St-Zip: EL SEGUNDO, CA 90245

Title: D () Delete
Name: PROVENZANO, ROBERT
Address: 22201 MOROSS ROAD SUITE 250
City-St-Zip: GROSSE POINTE, MI 48236

Title: D () Delete
Name: KOGOD, DENNIS
Address: 15253 BAKE PKWY
City-St-Zip: IRVINE, CA 92618

Title: () Delete
Name:
Address:
City-St-Zip:

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: AS () Change (X) Addition
Name: POLK, POLK
Address: 601 HAWAII STREET
City-St-Zip: EL SEGUNDO, CA 90245

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORINNA POLK

AS

05/08/2008

Electronic Signature of Signing Officer or Director

_____ Date