## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001444

Entity Name: WORLD COLLEGE OF LIFE, INC.

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8661 CORKSCREW RD. ESTERO, FL 33928

**Current Mailing Address: New Mailing Address:** 

PO BOX 97 PMB 333

21301 S. TAMIAMI TRAIL, SUITE 320 ESTERO, FL 33928

ESTERO, FL 33928

FEI Number: 65-1024726 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

**CLASP INC** 3001 TAMIAMI TRL NORTH 4TH FLOOR NAPLES, FL 34103 US

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** 

(X) Change ( ) Addition () Delete

DAURAY, CHARLES DAURAY, CHARLES Name: Name:

PO BOX 97 Address: PMB 333, 21301 S. TAMIAMI TR, SUITE 320 Address:

ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 City-St-Zip:

Title: DV Title: (X) Change ( ) Addition ( ) Delete

COX, JOE B Name: COX, JOE B Name: Address: PO BOX 97 Address:

PMB 333, 21301 S.TAMIAMI TR, SUITE 320 City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

Title: DTS () Delete Title: DTS (X) Change ( ) Addition

ALLER, JUDY Name: ALLER, JUDY Name:

PMB 333, 21301 S.TAMIAMI TR, SUITE 320 Address: PO BOX 97 Address:

City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

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: CHARLES DAURAY DP 04/30/2009