2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003994

FILED Jan 21, 2009 Secretary of State

Entity Name: THE SENIOR LIFE FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	DD ROAD IVILLE, FL 32	257		
Current Mailing Address:			New Mailing Address:	
P. O. BOX IACKSON	(57443 IVILLE, FL 32	241		
El Number	: 59-3666641	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
745 HOC	EGGEN, MARI DD ROAD IVILLE, FL 32			
		submits this statement for the	ourpose of changing its register	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the	ourpose of changing its register	ed office or registered agent, or both,
	e of Florida.			
n the Stat SIGNATU	e of Florida. RE: Electro	nic Signature of Registered Ag	ent	Date
n the Stat	e of Florida.	nic Signature of Registered Ag	ent ADDITIONS/CHANG	Date BES TO OFFICERS AND DIRECTOR
n the Stat SIGNATU	e of Florida. RE: Electro S AND DIREC	nic Signature of Registered Ag CTORS:) Delete EN, MARI F OAD	ent	Date
n the Stat SIGNATU DFFICER ittle: lame: .ddress:	e of Florida. RE: Electro S AND DIRECTOR PD (TERBRUEGGE 9745 HOOD R JACKSONVILL	nic Signature of Registered Ag CTORS:) Delete EN, MARI F OAD LE, FL 32257) Delete ELEN R COVE DRIVE	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR
on the State SIGNATU DFFICER itle: lame: ddress: itty-St-Zip: ittle: lame: ddress:	e of Florida. RE: Electro S AND DIREC PD (TERBRUEGGE 9745 HOOD R JACKSONVILL TD (CHESTNUT, H 13842 KETCH JACKSONVILL	nic Signature of Registered Ag CTORS:) Delete EN, MARI F OAD LE, FL 32257) Delete ELEN R COVE DRIVE LE, FL 32224) Delete E A TH ST	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR () Change () Addition

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: MARI TERBRUEGGEN, PRESIDENT PD 01/21/2009