## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007180

FILED May 03, 2012 Secretary of State

Entity Name: CITY OF LIFE FOUNDATION, INC.

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

1020 N ORLANDO AVE 4035 WEST 1ST STREET STE 300 SUITE 3

MAITLAND, FL 32751 45 SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

1020 N ORLANDO AVE P.O. BOX 940430
STE 300 MAITI AND FL 32794

STE 300 MAITLAND, FL 32794 MAITLAND, FL 32794

FEI Number: 59-3682123 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:

CROSS, JAMES 201 S ORANGE AVE SUITE 800 ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: V

Name: JOE, KILSHEIMER
Address: 1513 LEOPARD CT
City-St-Zip: APOPKA, FL 32712 V

Title: S

Name: PEREZ, MARY
Address: 435 SUNRISE COURT
City-St-Zip: ORLANDO, FL 32803

Title: V

Name: BUFFA, PATRICK

Address: 420 S ORANGE AVENUE SUITE 220

City-St-Zip: ORLANDO, FL 32801

Title: T

Name: CROSS, JIM

Address: 201S ORANGE AVE SUITE 800

City-St-Zip: ORLANDO, FL 32801

Title: F

Name: GOREN, VIRGINIA

Address: 300 E CHURCH STREET STE 810

City-St-Zip: ORLANDO, FL 32801

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: JOE KILSHEIMER V 05/03/2012