

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004941

FILED
Apr 15, 2008
Secretary of State

Entity Name: ART FOR LIFE PRODUCTIONS, INC. OF CENTRAL FLORIDA

Current Principal Place of Business:

2651 COCHISE TR
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

2651 COCHISE TR
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3731245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'KEEFE, DANIEL J
2651 COCHISE TR
WINTER PARK, FL 32789 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARNES, DEBORAH
Address: 2045 PALM VISTA DR
City-St-Zip: APOKA, FL 32712

Title: D () Delete
Name: DORROUGH, KELLI
Address: 3919 LAKESIDE RESERVE LANE
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: OKEEFE, DANA M
Address: 2651 COCHISE TR
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: OKEEFE, DANIEL J
Address: 2651 COCHISE TRAIL
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: MICHAELS, MIA
Address: 2651 COCHISE TRAIL
City-St-Zip: WINTER PARK, FL 32789

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:

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: DANIEL J OKEEFE

PRES

04/15/2008

Electronic Signature of Signing Officer or Director

Date