## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000008675

Entity Name: BUILDING FOR LIFE, INC.

FILED Mar 03, 2008 Secretary of State

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

1131 N LAURA STREET JACKSONVILLE, FL 32206

Current Mailing Address: New Mailing Address:

1131 N LAURA STREET JACKSONVILLE, FL 32206

FEI Number: 26-0002099 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

LEE, ROBERT V DR REV

1131 N LAURA ST

LEE III, ROBERT V

1131 N LAURA ST

JACKSONVILLE, FL 32206 US JACKSONVILLE, FL 32206 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: REV. DR. ROBERT V. LEE III 03/03/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 DC
 (X) Change ( ) Addition

 Name:
 BURR, EDWARD E
 Name:
 BURR, EDWARD E CHAIR

 Address:
 1131 N LAURA STREET
 Address:
 1131 N LAURA STREET

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:
 JACKSONVILLE, FL 32206

 Title:
 D
 ( ) Delete
 Title:
 DP
 (X) Change ( ) Addition

 Name:
 EVANS, J RANDALL
 Name:
 LEE III, ROBERT V PRES

Address: 1131 N LAURA STREET Address: 1131 N LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32206

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf DS} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$ 

 Name:
 SPENCE, JEFF
 Name:
 MCCOWN, EDYE L SEC

 Address:
 1131 N LAURA STREET
 Address:
 1131 N LAURA STREET

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:
 JACKSONVILLE, FL 32206

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: REV. DR. ROBERT V. LEE III PRES 03/03/2008