

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 25, 2009
Secretary of State

DOCUMENT# N02000001037

Entity Name: IRY D. & GWENDOLYN HERBERT LIFE ENRICHMENT CENTER INCORPORATED.**Current Principal Place of Business:**C/O IRY D. HERBERT
301 W 22ND ST
RIVIERA BCH, FL 33404**New Principal Place of Business:****Current Mailing Address:**C/O IRY D. HERBERT
301 W 22ND ST
RIVIERA BCH, FL 33404**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HERBERT, IRY D
301 W 22ND ST
RIVIERA BCH, FL 33404 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:** PD () Delete
Name: HERBERT, IRY D
Address: 301 W 22ND ST
City-St-Zip: RIVIERA BCH, FL 33404**Title:** DV () Delete
Name: HERBERT, GWENDOLYN Y
Address: 301 W 22ND ST
City-St-Zip: RIVIERA BCH, FL 33404**Title:** D () Delete
Name: HERBERT, RAY V
Address: 301 W 22ND ST
City-St-Zip: RIVIERA BCH, FL 33404**Title:** DS () Delete
Name: BROOKS, MELVIN
Address: 7240 NW 44TH CT
City-St-Zip: LAUDERHILL, FL 33319**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:

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: IRY D. HERBERT

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date