

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005363

FILED
Apr 20, 2009
Secretary of State

Entity Name: LIFE MESSENGERS, INC.

Current Principal Place of Business:

10927 REGENCY DRIVE
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

10928 TARIN DRIVE
JACKSONVILLE, FL 32218 US

Current Mailing Address:

10927 REGENCY DRIVE
JACKSONVILLE, FL 32218 US

New Mailing Address:

10928 TARIN DRIVE
JACKSONVILLE, FL 32218 US

FEI Number: 81-0561520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEECH, BERT
10927 REGENCY DRIVE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

WEECH, BERT
10928 TARIN DRIVE
JACKSONVILLE, FL 32218 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:

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEECH, KEVIN
Address: 10927 REGENCY DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WEECH, TERRY
Address: 10927 REGENCY DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WEZENSKY, TWILA
Address: 10927 REGENCY DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: EBERHARDT, JOHN
Address: 10927 REGENCY DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEECH, KEVIN
Address: 10928 TARIN DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: WEECH, TERRY
Address: 10928 TARIN DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: WEZENSKY, TWILA
Address: 10928 TARIN DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: EBERHARDT, JOHN
Address: 10928 TARIN DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

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: KEVIN WEECH

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date