

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003236

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: LIFE COUNCIL INC.

## Current Principal Place of Business:

820 DELTONA BLVD  
B  
DELTONA, FL 32725 US

## New Principal Place of Business:

33411 TERRACONA DR  
SORRENTO SPRINGS, FL 32776 US

## Current Mailing Address:

820 DELTONA BLVD  
B  
DELTONA, FL 32725 US

## New Mailing Address:

33411 TERRACONA DR  
SORRENTO SPRINGS, FL 32776 US

FEI Number: 56-2340542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMPBELL, IAN A  
922 PRESCOTT BLVD  
DELTONA, FL 32738 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: P/D ( ) Delete  
Name: CAMPBELL, IAN A  
Address: 922 PRESCOTT BLVD  
City-St-Zip: DELTONA, FL 32738 US

Title: D ( ) Delete  
Name: HARRISON, PAULA  
Address: 2959 SHORE RD  
City-St-Zip: BELLMORE, NY 11710 US

Title: D ( ) Delete  
Name: NELSON, IAN  
Address: 143-11 181ST  
City-St-Zip: SPRINGFIELD GARDENS, NY 11413 US

Title: D ( ) Delete  
Name: ALLEN, RICHARD  
Address: 938 CLOVERLEAF BLVD  
City-St-Zip: DELTONA, FL 32725 US

Title: D ( ) Delete  
Name: LUMLEY, CAREY  
Address: 225 DOUGLAS RD  
City-St-Zip: ROSELLE, NJ 07203 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP/D (X) Change ( ) Addition  
Name: WHEELER, NISA T  
Address: 33411 TERRACONA DR  
City-St-Zip: SORRENTO SPRINGS, FL 32776 US

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: IAN A CAMPBELL

P/D

04/26/2008

Electronic Signature of Signing Officer or Director

Date