

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004158

FILED
Apr 04, 2008
Secretary of State

Entity Name: LIFE CORPS, INC.

Current Principal Place of Business:

3333 W PENSACOLA ST, STE 300
TALLAHASSEE, FL 32304

New Principal Place of Business:

3333 W PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304

Current Mailing Address:

3333 W PENSACOLA ST, STE 300
TALLAHASSEE, FL 32304

New Mailing Address:

3333 W PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304

FEI Number: 20-1252675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLK, THOMAS K
3333 W PENSACOLA ST, STE 300
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

OLK, THOMAS K
3333 W PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304 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:

04/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLK, THOMAS K
Address: 3333 W PENSACOLA ST, STE 300
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: FRANCISCO, FRANK
Address: 1703 W COLONIAL DR
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: SLEEPER, JAMES
Address: 1822 W STRASBURG RD
City-St-Zip: COATESVILLE, PA 193204801

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:

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: THOMAS K OLK

D

04/04/2008

Electronic Signature of Signing Officer or Director

Date