

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006175

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** THE LIFE CENTER UPC, INC.

**Current Principal Place of Business:**

734 62ND AVE N  
ST PETERSBURG, FL 33702

**New Principal Place of Business:**

**Current Mailing Address:**

734 62ND AVE N  
ST PETERSBURG, FL 33702

**New Mailing Address:**

**FEI Number:** 59-2469582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SISTRUNK, TIMOTHY L  
734 62 AVE N  
ST PETERSBURG, FL 33702 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:** D  
**Name:** ALLEYNE, ARDENE  
**Address:** 1527 NEWARK ST S  
**City-St-Zip:** SAINT PETERSBURG, FL 33711

**Title:** D  
**Name:** GANGADEEN, ROGER  
**Address:** 4460 68TH AVENUE NORHT  
**City-St-Zip:** ST. PETERSBURG, FL 33781

**Title:** D  
**Name:** MOOREFIELD, MARK  
**Address:** 4226 30TH AVE N  
**City-St-Zip:** ST. PETRSBURG, FL 33713

I hereby 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 all other like empowered.

**SIGNATURE:** TIMOTHY SISTRUNK

P

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date