

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007745

FILED
Mar 05, 2010
Secretary of State

Entity Name: A BETTER LIFE FOUNDATION, INC.

Current Principal Place of Business:

4551 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4551 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-1830671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A&A REGISTERED AGENT, INC.
4551 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146 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
Name: HOEGH, ANDERS
Address: 1105 PLACETAS AVE.
City-St-Zip: CORAL GABLES, FL 33146

Title: TD
Name: CASSELL, MINDY
Address: 5935 CHAPMAN FIELDS DRIVE
City-St-Zip: MIAMI, FL 33156

Title: SD
Name: BLACKMAN, JOAN
Address: 1105 PLACETAS AVE.
City-St-Zip: CORAL GABLES, FL 33146

Title: D
Name: SUTHERLAND, VICTORIA
Address: 3859 CARBON CANYON ROAD
City-St-Zip: MALIBU, CA 90265

Title: D
Name: FINE, DAWN
Address: 5300 FAIRCHILD WAY
City-St-Zip: CORAL GABLES, FL 33156

Title: D
Name: JENSEN, TROND
Address: 6120 RIVIERA DRIVE
City-St-Zip: CORAL GABLES, FL 33146

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: RICHARD A. ALAYON

RA

03/05/2010

Electronic Signature of Signing Officer or Director

Date