

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007934

FILED  
May 03, 2006  
Secretary of State

Entity Name: FORE LIFE, INC.

## Current Principal Place of Business:

17741 NW 28TH CT.  
MIAMI, FL 33056

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 541346  
OPA LOCKA, FL 33054

## New Mailing Address:

4724 NW 4TH ST  
PLANTATION, FL 33317 US

FEI Number: 83-0412490      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

TUCKER, PAULA P  
17741 NW 28TH CT.  
MIAMI, FL 33056 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 ( ) Delete  
Name: TUCKER, PAULA P  
Address: 17741 NW 28TH CT.  
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete  
Name: TAYLOR, LAWRENCE  
Address: P.O. BOX 541346  
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete  
Name: MATHEWS, KAREN  
Address: 2688 THE FOUNTAIN BLEAU  
City-St-Zip: ATLANTA, GA 30331

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: PHILLIPS, OLIVER C  
Address: 4724 NW 4TH ST  
City-St-Zip: PLANTATION, FL 33317 US

Title: VP/D (X) Change ( ) Addition  
Name: TAYLOR, LAWRENCE  
Address: P.O. BOX 541346  
City-St-Zip: OPA LOCKA, FL 33054

Title: S/D (X) Change ( ) Addition  
Name: MATHEWS, KAREN  
Address: 2688 THE FOUNTAIN BLEAU  
City-St-Zip: ATLANTA, GA 30331

Title: T/D ( ) Change (X) Addition  
Name: REV. THOMPSON, PATRICK E  
Address: 4724 NW 4TH ST  
City-St-Zip: PLANTATION, FL 33317 US

I hereby certify that the information supplied with this filing does not qualify for the 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: OLIVER C PHILLIPS

PRES

05/03/2006

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

\_\_\_\_\_  
Date