

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007934

FILED
Apr 21, 2009
Secretary of State

Entity Name: FORE LIFE, INC.

Current Principal Place of Business:

4141 NW 16TH STREET
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 541346
MIAMI, FL 33054 US

New Mailing Address:

FEI Number: 83-0412490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: P/D () Delete
Name: TAYLOR, LAWRENCE
Address: P. O. BOX 541346
City-St-Zip: MIAMI, FL 33313 US

Title: VP/D () Delete
Name: SEARS, WILLIAM R
Address: 1545 THOMASWOODS TRAIL
City-St-Zip: INDIANAPOLIS, IN 46204 US

Title: S/D () Delete
Name: HANKERSON, DIANNE
Address: 10890 PINE TREE TERR
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: T/D () Delete
Name: PHILLIPS, OLIVER
Address: 4724 NW 4TH ST
City-St-Zip: PLANTATION, FL 33317 US

Title: A/D () Delete
Name: TAYLOR, SANDRA
Address: 17741 NW 28TH CT
City-St-Zip: MIAMI, FL 33056 US

Title: ED/D () Delete
Name: TUCKER, PAULA P
Address: 17741 NW 28TH CT
City-St-Zip: MIAMI, FL 33056 US

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:

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: PAULA PEARSON-TUCKER

ED

04/21/2009

Electronic Signature of Signing Officer or Director

Date