

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007869

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: K-LIFE OF JACKSONVILLE, INC.

## Current Principal Place of Business:

6873 SAN SEBASTIAN AVE  
JACKSONVILLE, FL 32217

## New Principal Place of Business:

## Current Mailing Address:

1353 LAKESHORE DRIVE  
BRANSON, MO 65616

## New Mailing Address:

FEI Number: 43-1538224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQ. BLVD.  
SUITE 101  
TALLAHASSEE, FL 32301 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 ( ) Delete  
Name: FRANCIS, JIM  
Address: 4284 MCGIRTS BLVD  
City-St-Zip: JACKSONVILLE, FL 33210

Title: VP ( ) Delete  
Name: MORROW, BILL  
Address: 2233 SEGOVIA AVE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: S ( ) Delete  
Name: JACOBY, BOB  
Address: 2635 WRIGHTSON DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: T ( ) Delete  
Name: PEACOCK, STEVE  
Address: 948 HOLLY LANE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: M ( ) Delete  
Name: GREEN, DOUG  
Address: 9155 BEAULIERC CIRCLE W  
City-St-Zip: JACKSONVILLE, FL 32257

Title: M ( ) Delete  
Name: CELLAR, BILL  
Address: 1830 EPPING FOREST WAY S  
City-St-Zip: JACKSONVILLE, FL 32217

## 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: KARLA MCCULLOUGH

AA

04/30/2008

Electronic Signature of Signing Officer or Director

Date