

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010085

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: HEMA UNIVERSAL LIFE COMMUNITY SERVICES INC

**Current Principal Place of Business:**

4620 SAINT CIRCLE LANE  
SUITE 917  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

4620 SAINT CIRCLE LANE  
SUITE 917  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: 20-3648225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEGAL ZOOM NEVADA INC  
44 W. FLAGLER ST  
SUITE 675  
MIAMI, FL 33130 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: CALDERON, HENRY JR  
Address: 4620 SAINT CIRCLE LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: BENOIT, MARTHA  
Address: 4620 SAINT CIRCLE LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: VEGA, MANUEAL L  
Address: 4620 SAINT CIRCLE LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CALDERON, HENRY JR  
Address: 4620 SAINT CROIX LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change ( ) Addition  
Name: BENOIT, MARTHA  
Address: 4620 SAINT CROIX LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change ( ) Addition  
Name: VEGA, MANUEAL L  
Address: 4620 SAINT CROIX LANE SUITE 917  
City-St-Zip: NAPLES, FL 34109

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: HENRY CALDERON JR

D

01/10/2006

Electronic Signature of Signing Officer or Director

Date