

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001904

FILED
Apr 15, 2008
Secretary of State

Entity Name: ALL PURPOSE LIFESKILLS, INC.

Current Principal Place of Business:

ELLEN LOEBELENZ
1958 NW 79TH WAY
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

ALL PURPOSE LIFESKILLS, INC.
P O BOX 84 8805
PEMBROKE PINES, FL 33084

New Mailing Address:

FEI Number: 13-4321644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOEBELENZ, ELLEN
1958 NW 79TH WAY
PEMBROKE PINES, FL 33024 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 () Delete
Name: LOEBELENZ, ELLEN
Address: 1958 NW 79 WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TD () Delete
Name: HAGAN, LAURA
Address: 6811 PARK ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD () Delete
Name: DUMAREILLE, ANNIE
Address: 1880 NW 79TH AVE
City-St-Zip: PEMBROKE PINES, FL 33024

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: LOEBELENZ, ELLEN
Address: 1958 NW 79 WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T (X) Change () Addition
Name: GROSS, ROBERT
Address: 1000 RIVER REACH
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: S (X) Change () Addition
Name: WIGZELL, RICHARD
Address: 5200 MAVERICK DRIVE
City-St-Zip: AUSTIN, TX 78727

Title: P () Change (X) Addition
Name: COMBEST, PHILIP
Address: 2101 S.W. 119TH AVE
City-St-Zip: MIRAMAR, FL 33025

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: ELLEN LOEBELENZ

CEO

04/15/2008

Electronic Signature of Signing Officer or Director

_____ Date