2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N06000004135

Entity Name: KNOWLEDGE FOR LIVING, INC.

Current Principal Place of Business:

116 B PARRAMORE AVENUE
ORLANDO, FL 32901

New Principal Place of Business:

116 B PARRAMORE AVENUE
ORLANDO, FL 32801

Current Mailing Address:

P.O. BOX 555452
ORLANDO, FL 32855

New Mailing Address:

FEI Number: 20-4693041 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAMIDULLAH, AMINAH
2854 TOLWORTH AVENUE
ORLANDO, FL 32837 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/P	( ) Delete
Name:	HAMIDULLAH, AMINAH	
Address:	2854 TOLWORTH AVENUE	
City-St-Zip:	ORLANDO, FL 32837	
Title:	TREA	( ) Delete
Name:	HAMIDULLAH, HATIM	
Address:	2854 TOLWORTH AVENUE	
City-St-Zip:	ORLANDO, FL 32837	
Title:	VP	( ) Delete
Name:	RIVERA, APRIL	
Address:	14414 AVALON RESERVE BLVD #104	
City-St-Zip:	ORLANDO, FL 32828	
Title:	SEC	( ) Delete
Name:	DIAZ, JULIUS	
Address:	1390 TROPICAL DRIVE # 2122	
City-St-Zip:	ORLANDO, FL 32839	
Title:	ADV	( ) Delete
Name:	HENSON, GARY	
Address:	1290 NORTHRIDGE BLVD #721	
City-St-Zip:	CLAIRMONT, FL 34711	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	KING, YUSEF	
Address:	1938 SINGER WAY	
City-St-Zip:	LITHONIA, GA 30058	
Title:	SEC	(X) Change ( ) Addition
Name:	CASSIM, APRIL	
Address:	205 GREEN LAKE CIRLCE	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	ADV	(X) Change ( ) Addition
Name:	LATIFAH, RASHID	
Address:	607 E. WILLIAMS STREET	
City-St-Zip:	MELBOURNE, FL 32901	

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: AMINAH HAMIDULLAH DIR 04/06/2009

Electronic Signature of Signing Officer or Director — Date