

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004305

FILED
Jan 14, 2007
Secretary of State

Entity Name: REAL LIFE FELLOWSHIP INC.

Current Principal Place of Business:

36620 JUDEE DR
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

36620 JUDEE DR
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: 20-5334232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, EDWARD G
36620 JUDEE DR
ZEPHYRHILLS, FL 33541 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: DP () Delete
Name: THOMPSON, EDWARD G
Address: 36620 JUDEE DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: DV () Delete
Name: LEA, SUN B
Address: 36620 JUDEE DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: DST () Delete
Name: HUSTED, MAUREEN
Address: 27749 QUAIL VIEW LN
City-St-Zip: WESLEY CHAPLE, FL 33544

Title: D () Delete
Name: BIERWORTH, DAN
Address: 10725 OAK DR
City-St-Zip: HUDSON, FL 34669

Title: D () Delete
Name: GIBSON, CAROL
Address: 4148 LANIER RD
City-St-Zip: ZEPHYRHILLS, FL 33541

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:

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: EDWARD G THOMPSON

DP

01/14/2007

Electronic Signature of Signing Officer or Director

Date