

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006528

FILED
Apr 18, 2008
Secretary of State

Entity Name: BREATH OF LIFE, INC.

Current Principal Place of Business:

1900 EAST BAY DRIVE
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

1900 EAST BAY DRIVE
LARGO, FL 33771

New Mailing Address:

FEI Number: 20-5120368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BACON, BRITTNY P ESQ
2959 FIRST AVENUE NORTH
ST PETERSBURG, FL 33713 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: SHIELDS, STEPHEN J MD
Address: 12701 FRANK DRIVE N
City-St-Zip: SEMINOLE, FL 33776

Title: SD () Delete
Name: ARRINGTON, KATHY
Address: 5400 50TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33709

Title: TD () Delete
Name: STEUER, MICHAEL E CPA
Address: 2613 BELLHURST DRIVE
City-St-Zip: DUNEDIN, FL 34698

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ARRINGTON, KATHY
Address: 5400 50TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33709

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Change (X) Addition
Name: KOVAC, GREGORY
Address: 2931 ELYSIUM WAY
City-St-Zip: CLEARWATER, FL 33759

Title: SD () Change (X) Addition
Name: BACON, BRITTNY
Address: 2959 FIRST AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33713

Title: D () Change (X) Addition
Name: PILKINGTON, DAVID
Address: 7295 SAVOY COURT
City-St-Zip: SEMINOLE, FL 33776

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: MICHAEL E. STEUER, CPA

TD

04/18/2008

Electronic Signature of Signing Officer or Director

Date