

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006890

Entity Name: C & M LIFELINE, INC.

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

1324 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136

New Principal Place of Business:

Current Mailing Address:

1324 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: 20-5169750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERS, MARY E.
1324 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136 US

Name and Address of New Registered Agent:

ANDERS, MARY E DR.
1324 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136 US

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: DR. MARY E. ANDERS

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDERS, CHARLES D.
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D () Delete
Name: ANDERS, REBECCA S
Address: 91 RIVERS EDGE LN.
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: ANDERS, MARY E.
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D () Delete
Name: ANDERS, LORI B.
Address: 3039 VAUGHAN DR.
City-St-Zip: CUMMING, GA 30041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDERS, CHARLES D REV.
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

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

Title: D (X) Change () Addition
Name: ANDERS, MARY E DR.
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

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

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: CHARLES D. ANDERS

REV.

04/13/2009

Electronic Signature of Signing Officer or Director

Date