

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006890

FILED
Apr 18, 2011
Secretary of State

Entity Name: C & M LIFELINE, INC.

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 ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

ANDERS, THEODORE D 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: THEODORE D. ANDERS PHD.

04/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ANDERS, THEODORE D DR.
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136 US

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

Title: D
Name: ANDERS, REBECCA S
Address: 91 RIVERS EDGE LANE
City-St-Zip: PALM COAST, FL 32137 US

Title: D
Name: ANDERS, LORI B
Address: 1324 S. CENTRAL AVE.
City-St-Zip: FLAGLER BEACH, FL 32136

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

I hereby 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 all other like empowered.

SIGNATURE: THEODORE D. ANDERS, PHD.

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date