2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N06000011328

Entity Name: ORLANDO K-LIFE, INC.

Current Principal Place of Business:

11104 LAKE BUTLER BLVD
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

1353 LAKESHORE DR
BRANSON, MO 65616

New Mailing Address:

FEI Number: 20-5792210 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 32301 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:	P	( ) Delete
Name:	STEVE AND JEANINE, HAMMOND	
Address:	11104 LAKE BUTLER BLVD	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	M	( ) Delete
Name:	CHUCK AND ANGIE, ROSS	
Address:	2139 KANE PARKWAY	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	M	( ) Delete
Name:	CURTIS AND KRISTIN, WAGNER	
Address:	1448 KELSO BLVD	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	M	( ) Delete
Name:	EUGENE AND NANCY, REX	
Address:	11518 WILLOW GARDENS DR	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	M	( ) Delete
Name:	KEVIN AND SUSAN, HAMMOCK	
Address:	9781 CAMBERLEY CIR	
City-St-Zip:	ORLANDO, FL 32836	
Title:	M	( ) Delete
Name:	KRIS AND LAURA, CREEDEN	
Address:	17550 COBBLESTONE LN	
City-St-Zip:	CLERMONT, 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:	( ) 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 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: KARLA MCCULLOUGH AA 04/30/2008

Electronic Signature of Signing Officer or Director — Date