

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010574

**FILED**  
**Feb 11, 2011**  
**Secretary of State**

**Entity Name:** SCHOOL OF LIFE, INC.

**Current Principal Place of Business:**

375 SHERWOOD FOREST DRIVE  
DELRAY BCH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

375 SHERWOOD FOREST DRIVE  
DELRAY BCH, FL 33445 US

**New Mailing Address:**

**FEI Number:** 26-1469874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EHLERS, MARION  
375 SHERWOOD FOREST DRIVE  
DELRAY BCH, FL 33445 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:** D  
**Name:** EHLERS, MARION  
**Address:** 375 SHERWOOD FOREST DRIVE  
**City-St-Zip:** DELRAY BCH, FL 33445 US

**Title:** DVP  
**Name:** O'HIGGINS, TIMOTHY DR.  
**Address:** 5564 LAKE OSBORNE DRIVE  
**City-St-Zip:** LAKE WORTH, FL 33461 US

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:** MARION EHLERS

D

02/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date