

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000394

FILED
Sep 07, 2010
Secretary of State

Entity Name: LIFEFORCE ARTS AND TECHNOLOGY ACADEMY, INC.

Current Principal Place of Business:

1390 SUNSET POINT RD.
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1390 SUNSET POINT RD.
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 27-0338624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELORES, BELL
1356 TERRACE RD
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

MICKENS, MAURICE E
8411 BASUTO DRIVE
TRINITY, FL 34655 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: MAURICE MICKENS

09/07/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MICKENS, MAURICE
Address: 8411 BASUTO DRIVE
City-St-Zip: TRINITY, FL 34655

Title: VP
Name: MACK, PSALMS
Address: ROYAL PALMS DRIVE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33703

Title: TREA
Name: WALKER, KATHY
Address: 1312 ALHAMBRA WAY S.
City-St-Zip: ST. PETERSBURG, FL 33705

Title: SEC
Name: MACK, PSALMS
Address: ROYAL PALMS DR. S
City-St-Zip: ST PETERSBURG, FL 33703

Title: MEMB
Name: BANKS, SYLVESTER
Address: 908 PALM BLUFF STREET
City-St-Zip: CLEARWATER, FL 33755

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: MAURICE E. MICKENS

PRES

09/07/2010

Electronic Signature of Signing Officer or Director

Date