

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2008 8:00 am
Secretary of State

08-18-2008 90003 038 ****70.00

40113763



DOCUMENT # N09374 1. Entity Name PARENTS ADOPTION LIFELINE, INC.					
Principal Place of Business 1428 MAGLIANO DRIVE BOYNTON BEACH, FL 33436 US			Mailing Address PO BOX 32314 PALM BEACH GARDENS, FL 33420 US		
2. Principal Place of Business - No P.O. Box # 1003 Vision Terrace		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Palm Beach Gardens, FL		City & State		4. FEI Number 65-0154286	
Zip 33418		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PRABHU, BERNADETTE 1428 MAGLIANO DRIVE BOYNTON BEACH, FL 33436				7. Name and Address of New Registered Agent Name Patricia Laine Street Address (P.O. Box Number is Not Acceptable) 1003 Vision Terrace City Palm Beach Gardens, FL Zip Code 33418	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Patricia Laine</i></u> DATE <u>8-08-08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to: Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDREASSI, TRACY 2308 23RD CT JUPITER, FL 33477	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAINE, PATRICIA PO BOX 32314 PALM BEACH GARDENS, FL 33420	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D/T Laine, Patricia 1003 Vision Terrace Palm Beach Gardens, FL 33418	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BERNADETTE, PRABHU PO BOX 32314 PALM BEACH GARDENS, FL 33420	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Cummings, Dawn 8556 Tourmaline Blvd Boynton Beach, FL 33472	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STUCKZ, LEANNE PO BOX 32314 PALM BEACH GARDENS, FL 33420	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Slater, Kathleen 198 Jones Creek Rd., Jupiter, FL 33458	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP APPLEBY, REGINA 536 INLET RD NORTH PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Budke, Rachel 17880 122nd Dr. N., Jupiter, FL 33478	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Patricia Laine</i></u> Patricia Laine, co-President/Director			Date <u>8/08/08</u> Daytime Phone # <u>561-351-4441</u>		