2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10544

FILED Jan 18, 2008 Secretary of State

Entity Name: KEY LIFE NETWORK, INC.

	incipal Place of Business:	New Principal Place of Business:
	AILLES DR), FL 32751 US	
Current Ma	ailing Address:	New Mailing Address:
	AILLES DR 9, FL 32751 US	
FEI Number:	59-2607667 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired (X)
Name and	Address of Current Registered Age	ent: Name and Address of New Registered Agent:
539 VERSA	GEORGE V/T AILLES DR. J. FL 32751 US	
The above in the State		or the purpose of changing its registered office or registered agent, or both,
SIGNATUR		
	Electronic Signature of Register	ed Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name:	P/T () Delete BROWN, STEPHEN W	Title: () Change () Addition
Address: City-St-Zip:	901 KENSINGTON GARDEN CT OVIEDO, FL 32765	Name: Address: City-St-Zip:
		Address:
City-St-Zip: Title: Name: Address:	OVIEDO, FL 32765 T () Delete BLOCK, ROBERT 6840 HUNTINGTON LAKES CR. #202	Address: City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	OVIEDO, FL 32765 T () Delete BLOCK, ROBERT 6840 HUNTINGTON LAKES CR. #202 NAPLES, FL 34119 S/T () Delete ALWINSON, PETER 1169 TROTWOOD BLVD.	Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	OVIEDO, FL 32765 T () Delete BLOCK, ROBERT 6840 HUNTINGTON LAKES CR. #202 NAPLES, FL 34119 S/T () Delete ALWINSON, PETER 1169 TROTWOOD BLVD. WINTER SPRINGS, FL 32708 V/T () Delete BINGHAM, GEORGE 1129 CLINGING VINE PL	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: GEORGE BINGHAM V/T 01/18/2008