

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011229

FILED  
Apr 02, 2012  
Secretary of State

Entity Name: RETURN TO LIFE, INC

**Current Principal Place of Business:**

3925 RADCLIFF AVE  
NORTH PORT, FL 34287 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7815  
NORTH PORT, FL 34290 US

**New Mailing Address:**

FEI Number: 45-4085654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DUNCHYK, ALIAKSANDR  
3925 RADCLIFF AVE  
NORTH PORT, FL 34287 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  
Name: DUNCHYK, ALIAKSANDR  
Address: 3925 RADCLIFF AVE  
City-St-Zip: NORTH PORT, FL 34287 US

Title: V  
Name: KUCHUK, IHAR  
Address: 192 E FULTON ST, APT E  
City-St-Zip: EPHRATA, PA 17522 US

Title: S  
Name: BISTREVSKEY, EKATERINA  
Address: 2987 LA TASSELL ST  
City-St-Zip: NORTH PORT, FL 34288 US

Title: T  
Name: DUNCHYK, ALESIA  
Address: 3925 RADCLIFF AVE  
City-St-Zip: NORTH PORT, FL 34287

Title: AS  
Name: DUNCHYK, LYUDMILA  
Address: 4640 LIBBY RD  
City-St-Zip: NORTH PORT, FL 34287 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: ALIAKSANDR DUNCHYK

P

04/02/2012

Electronic Signature of Signing Officer or Director

Date