

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51287

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: SCHOOLIFE, INC.

**Current Principal Place of Business:**

1300 S. OLIVE AVE.  
W PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1496  
W PALM BEACH, FL 334021496 US

**New Mailing Address:**

FEI Number: 65-0354886

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WELLS, JACK D  
4849 SABLE PINE CIR.  
C-1  
W PALM BEACH, FL 33417 US

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

ABDELLA, LEO F  
633 HUDSON BAY DRIVE  
PALM BEACH GARDENS, FL 33410 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: LEO F. ABDELLA

04/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WELLS, JACK D.  
Address: 4849 SABLE PINE CIRCLE, C-1  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: C ( ) Delete  
Name: BOROWSKI, JOHN  
Address: 1 MARLWOOD LANE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T ( ) Delete  
Name: YOUNG, JACKIE  
Address: 1337 W 27TH ST  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VC ( ) Delete  
Name: CHAPPELL, JOHN  
Address: 850 S COUNTY ROAD, 102  
City-St-Zip: PALM BEACH, FL 33480

Title: S ( ) Delete  
Name: ROY, MARLENE  
Address: 7528 SE TETON DR  
City-St-Zip: HOBE SOUND, FL 33455

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ABDELLA, LEO F  
Address: 633 HUDSON BAY DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD (X) Change ( ) Addition  
Name: WELLS, JACK D  
Address: 4849 SABLE PINE CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33417 27

Title: TD (X) Change ( ) Addition  
Name: KOHLMAYER, FRED  
Address: 4462 HICKORY DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VD (X) Change ( ) Addition  
Name: MALONE, BOB  
Address: 3300 SPRINGDALE BLVD #M219  
City-St-Zip: PALM SPRINGS, FL 33461

Title: D (X) Change ( ) Addition  
Name: ANDERSON, JERRY  
Address: 750 OCEAN ROYALE WAY #302  
City-St-Zip: JUNO BEACH, FL 33408

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: LEO F. ABDELLA

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date