2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000910

Entity Name: GIFT OF LIFE, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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4437 PARK BLVD 4439 PARK BLVD

PINELLAS PARK, FL 33781 US PINELLAS PARK, FL 33781 US

Current Mailing Address: New Mailing Address:

150 2ND AVENUE NORTH 4439 PARK BLVD

1600 PINELLAS PARK, FL 33781 US ST, PETESRBURG, FL 33701 US

FEI Number: 59-3212207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAVIS, CLIFF 288 BÉACH DRIVE # 12-B ST.PETERSBURG, FL 33701 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

DAVIS, CLIFF Name: Name: Address: 288 BEACH DRIVE # 12-B Address: City-St-Zip: ST. PETERSBURG, FL 33701 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: CLIFF DAVIS DP 04/30/2009