## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000242

Entity Name: LIFE SOURCE, INC.

FILED Apr 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

LIFE SOURCE, INC 2360 SE 51ST AVE OCALA, FL 344801185 US

Current Mailing Address: New Mailing Address:

LIFE SOURCE, INC 2360 SE 51ST AVE OCALA, FL 344801185 US

FEI Number: 59-3300334 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:

AMERLING, RUSSELL E REV LIFE SOURCE, INC LIFE SOURCE, INC 2360 SE 51ST AVE OCALA, FL 344801185 US AMERLING, RUSSELL E REV LIFE SOURCE, INC 2360 SE 51ST AVE OCALA, FL 344801185 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: RUSSELL E AMERLING 04/25/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DPCM () Change () Addition () Delete AMERLING, RUSSELL E Name: Name: 2360 SE 51 ST AVE Address: Address: City-St-Zip: OCALA, FL 344801185 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: AMERLING, JILL R Name:

 Name:
 AMERLING, JILL R
 Name:

 Address:
 2360 SE 51 ST AVE
 Address:

 City-St-Zip:
 OCALA, FL 344801185
 City-St-Zip:

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

Name: DEHART, KIM Name:
Address: 7 ALMOND TRAIL COURT Address:
City-St-Zip: OCALA, FL 34472 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: RUSSELL E AMERLING P 04/25/2009