

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004288

FILED  
Apr 11, 2005  
Secretary of State

**Entity Name:** YOU'RE A LIFE SAVER PRECIOUS MOMENTS COLLECTOR'S CLUB, INC.

**Current Principal Place of Business:**

%THE ENTERTAINER  
655 REGENCY SQUARE BLVD  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 111436  
JACKSONVILLE, FL 32239

**New Mailing Address:**

**FEI Number:** 59-3430538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIZEMORE, C. LAYNETTE  
11338 ELAINE DR  
JACKSONVILLE, FL 32218 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: TD ( ) Delete  
Name: SIZEMORE, LAYNETTE  
Address: 11338 ELAINE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete  
Name: MORRIS, MELINDA  
Address: 11541 YOUNG RD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S ( ) Delete  
Name: WEIKERT, SHIRLEY  
Address: 1105 PANUCO AVE. N.  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: CPD ( ) Delete  
Name: CANADY, PAT  
Address: 12686 PUMPKIN HILL RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: CPD (X) Delete  
Name: GORDON, AMY  
Address: 45284 AMERICAN DREAM DR  
City-St-Zip: CALLAHAN, FL 32011

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

Title: VP (X) Change ( ) Addition  
Name: SIZEMORE, LAYNETTE  
Address: 11338 ELAINE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: P (X) Change ( ) Addition  
Name: MORRIS, MELINDA  
Address: 11541 YOUNG RD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: CANADY, PAT  
Address: 12686 PUMPKIN HILL RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAT CANADY

TD

04/11/2005

Electronic Signature of Signing Officer or Director

Date