2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008
Secretary of State

DOCUMENT# N97000004288

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

Current Principal Place of Business:

% STARFIRE
655 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

New Principal Place of Business:

655 REGENCY SQUARE BLVD
#800
JACKSONVILLE, FL 32225

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: VP ( ) Delete
Name: SIZEMORE, LAYNETTE
Address: 11338 ELAINE DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: MELINDA MORRIS P 04/07/2008

Electronic Signature of Signing Officer or Director — Date