

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004211

FILED
Feb 26, 2009
Secretary of State

Entity Name: VINELIFE NETWORK, INC.

Current Principal Place of Business:

1828 KIMBERLY LANE
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

1828 KIMBERLY LANE
INVERNESS, FL 34452

New Mailing Address:

FEI Number: 31-1665825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIRKEY, DAVID L
1828 KIMBERLY LANE
INVERNESS, FL 34452 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: PD () Delete
Name: SHIRKEY, DAVID L
Address: 1828 KIMBERLY LN
City-St-Zip: INVERNESS, FL 34452

Title: D () Delete
Name: TAYLOR, CARLTON
Address: 1041 S KNOBCREEK RD
City-St-Zip: SEYMOUR, TN 37865

Title: TSD () Delete
Name: SHIRKEY, JENNIE C
Address: 1828 KIMBERLY LN
City-St-Zip: INVERNESS, FL 34452

Title: VD () Delete
Name: SNYDER, TOM
Address: 1320 ROCK SPRINGS DR
City-St-Zip: MELBOURNE, FL 32940

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: DAVID L. SHIRKEY

OD

02/26/2009

Electronic Signature of Signing Officer or Director

Date