

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005722

FILED
Sep 08, 2004
Secretary of State

Entity Name: TRUE LIFE COMMUNITY RESOURCE CENTER INC.

Current Principal Place of Business:

39340 US 19 NORTH
TARPON SPRINGS, FL 34689

New Principal Place of Business:

2051 GRAND BOULEVARD
HOLIDAY, FL 34690

Current Mailing Address:

P.O. BOX 312
TARPON SPRINGS, FL 34689

New Mailing Address:

P.O. BOX 312
TARPON SPRINGS, FL 34688

FEI Number: 31-1672572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKAY, GEORGE III
9407 HILLDROP CT
TAMPA, FL 33615

Name and Address of New Registered Agent:

MCKAY, REBECCA
4303 CRAFTSBURY DRIVE
NEW PORT RICHEY, FL 34652

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: REBECCA MCKAY

09/08/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCKAY, GEORGE III
Address: 9407 HILLDROP CT
City-St-Zip: TAMPA, FL 33615

Title: DVP () Delete
Name: MCKAY, REBECCA DR.
Address: 9407 HILLDROP CT
City-St-Zip: TAMPA, FL 33615

Title: DT () Delete
Name: HIGGINS, GEORGE III
Address: 9407 HILLDROP CT
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCKAY, GEORGE III
Address: 4303 CRAFTSBURY DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DVP (X) Change () Addition
Name: MCKAY, REBECCA DR.
Address: 4303 CRAFTSBURY DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

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: REBEC CA MCKAY

DR.

09/08/2004

Electronic Signature of Signing Officer or Director

Date