## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091883

Entity Name: LIFELINE FINANCIAL SERVICES, INC.

FILED Apr 07, 2005 Secretary of State

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

4601 GANDY BLVD. PO BOX 130061 TAMPA, FL 33611 TAMPA, FL 33681

Current Mailing Address: New Mailing Address:

4601 GANDY BLVD. PO BOX 130061 TAMPA, FL 33611 TAMPA, FL 33681

FEI Number: 59-3674261 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:

SHADDAY, LAWRENCE R PRES
4601 GANDY BLVD
PO BOX 130061
TAMPA, FL 33611 US
SHADDAY, LAWRENCE R PRES
PO BOX 130061
TAMPA, FL 33681 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: LAWRENCE R SHADDAY 04/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: SHADDAY, LAWRENCE R SHADDAY, LAWRENCE R

 Address:
 4601 GANDY BLVD.
 Address:
 PO BOX 130061

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33681

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE R SHADDAY P 04/07/2005