

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159518

Entity Name: GIFT OF LIFE COMMUNITY, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

4437 PARK BOULEVARD
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

Current Mailing Address:

7625 LEATHER FERN CT
PINELLAS PARK, FL 33782 US

New Mailing Address:

288 BEACH DR. NE #12B
ST. PETERSBURG, FL 33701 US

FEI Number: 20-1919487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, CLIFFORD J
7625 LEATHER FERN CT
PINELLAS PARK, FL 33782 US

Name and Address of New Registered Agent:

DAVIS, CLIFFORD J
288 BEACH DR. NE #12B
ST. PETERSBURG, FL 33701 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: CLIFF DAVIS

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIS, CLIFFORD J
Address: 7625 LEATHER FERN CT
City-St-Zip: PINELLAS PARK, FL 33782 US

Title: VP () Delete
Name: SCHARRER, LEE W
Address: 1040 FAWN CT.
City-St-Zip: OLDSMAR, FL 34677 US

Title: SECR (X) Delete
Name: LAVITCH, CHERYL R
Address: 10460 ROOSEVELT BLVD. #209
City-St-Zip: ST. PETERSBURG, FL 33716 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVIS, CLIFFORD J
Address: 288 BEACH DR. NE #12B
City-St-Zip: ST. PETERSBURG, FL 33701 US

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

SIGNATURE: CLIFF DAVIS

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date