

DOCUMENT # P97000071184

1. Entity Name*

EXTEND-A-LIFE INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90017 001 ***150.00

04-03-2000 90017 002 *****8.75



DO NOT WRITE IN THIS SPACE

Principal Place of Business

23190 ABELINE AVENUE
PORT CHARLOTTE FL 33980

Mailing Address

23190 ABELINE AVENUE
PORT CHARLOTTE FL 33982-8588

2. Principal Place of Business

29061 TORTOISE TRAIL

3. Mailing Address

29061 TORTOISE TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PUNTA GORDA FL

City & State

PUNTA GORDA FL

4. FEI Number

65-0773581

Applied For

Not Applicable

Zip

33982

Country

CHARLOTTE

Zip

33982

Country

CHARLOTTE

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHRISTENSEN, RICHARD A
23190 ABELINE AVENUE
PORT CHARLOTTE FL 33980

7. Name and Address of New Registered Agent

Name

RICHARD A. CHRISTENSEN

Street Address (P.O. Box Number is Not Acceptable)

29061 TORTOISE TRAIL

City

PUNTA GORDA

FL

Zip Code

33982

8. 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

R.A. Christensen
Signature, typed or printed name of registered agent and title if applicable.

R.A. CHRISTENSEN
(NOTE: Registered Agent signature required when reinstating)

DATE

FEB-5, 2000

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE COTP
NAME CHRISTENSEN, RICHARD A
STREET ADDRESS 22190 ABELINE AVE
CITY-ST-ZIP PORT CHARLOTTE FL 33980

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE COTP
NAME CHRISTENSEN, RICHARD A
STREET ADDRESS 29061 TORTOISE TRAIL
CITY-ST-ZIP PUNTA GORDA, FL 33982

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R.A. Christensen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R.A. CHRISTENSEN

Date

Daytime Phone If

FEB-5, 2000