2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755607

Entity Name: LIFE ENRICHMENT CENTER, INC.

Current Principal Place of Business:

9704 NORTH BOULEVARD TAMPA. FL 33612

Current Mailing Address:

9704 NORTH BOULEVARD TAMPA, FL 33612

FEI Number: 59-2108128 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TALBOTT, JOHN 15469 GULF BOULEVARD MADEIRA BEACH, FL 33708 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: JOHN TALBOTT 02/05/2014

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

TitleTTitleTRUSTEENameDOWNING, MARKNameCOUCH, TJ

Address 702 NORTH FRANKLIN ST Address P.O. BOX 17978

City-State-Zip: TAMPA FL 33602 City-State-Zip: TAMPA FL 33682-7978

Title SECRETARY Title HONORARY BOARD MEMBER

NameCHASTAIN, ZANITANameBUBLEY, MARTY ESQAddress7542 TERRACE RIVER DRIVEAddress2820 NORTHDALE BLVD

City-State-Zip: TAMPA FL 33637 City-State-Zip: TAMPA FL 33624

TitleTRUSTEETitleTREASURERNameMCEVOY, CATHYNameMOST, ERIC

Address 13301 BRUCE B. DOWNS BLVD. Address 3165 BAYSHORE OAKS DR.

FMHI-MHC City-State-Zip: TAMPA FL 33609

City-State-Zip: TAMPA FL 33612

Title TRUSTEE

Title TRUSTEE Name KALLAHER, JAMES II
Name WILSON, PAUL Address 216 W. SOUTH AVENUE

Address 290 9TH STREET N. SUITE M-100 City-State-Zip: TAMPA FL 33603

SUITE M-100

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I hereby 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 all other like empowered.

SIGNATURE: PAULA STAHEL TRUSTEE PRESIDENT 02/05/2014

Electronic Signature of Signing Officer/Director Detail

ST. PETERSBURG FL 33705

Date

FILED Feb 05, 2014

Secretary of State

CC0896589750

Date

Officer/Director Detail Continued:

Title PRESIDENT

Name STAHEL, PAULA

Address P.O. BOX 10604

City-State-Zip: TAMPA FL 33679

Title HONORARY BOARD MEMBER

Name TURNER, HEYWOOD A

Address 11714 LAKE ASTON CT.

#201

City-State-Zip: TAMPA FL 33626

Title TRUSTEE

Name MIRANDA, CHARLES

Address 2918 WEST LAKE AVENUE

City-State-Zip: TAMPA FL 33607

Title TRUSTEE

Name KOEHLER, BARBARA M

Address 10607 CARROLLBROOK LANE

City-State-Zip: TAMPA FL 33618

Title HONORARY BOARD MEMBER

Name PLATT, JAN

Address 3531 VILLAGE WAY

City-State-Zip: TAMPA FL 33629