

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000003903

**Entity Name:** RITELIFE SERVICES, INC.**Current Principal Place of Business:**5029 SE EBBTIDE AVE  
STUART, FL 34997**Current Mailing Address:**5029 SE EBBTIDE AVE  
STUART, FL 34997**FEI Number: 86-3334184****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOODY-HOLBROOK, BARBARA  
5029 SE EBBTIDE AVE  
STUART, FL 34997 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIR
Name	BRIGHT, JESSICA
Address	1154 ASTORWOOD PLACE
City-State-Zip:	STUART FL 34994

Title	DIR
Name	GRELLER, JANICE
Address	31 SW SOUTH RIVER DR. APT 201
City-State-Zip:	STUART FL 34997

Title	P
Name	MOODY-HOLBROOK, BARBARA
Address	5029 SE EBBTIDE AVE
City-State-Zip:	STUART FL 34997

Title	BOARD MEMBER
Name	CHANDRA, BROWN
Address	2350 SE FLORESTA DR
City-State-Zip:	PORT ST LUCIE FL 34984

Title	BOARD MEMBER
Name	GALLAWAY, BARBARA
Address	5029 SE EBBTIDE AVE
City-State-Zip:	STUART FL 34997

Title	BOARD MEMBER
Name	PIERPONT, MICHAEL
Address	5029 SE EBBTIDE AVE
City-State-Zip:	STUART FL 34997

*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: BARBARA MOODY-HOLBROOK****CEO****01/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date