

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008533

FILED  
Feb 19, 2008  
Secretary of State

Entity Name: LIFELINK INTERNATIONAL, INC.

## Current Principal Place of Business:

9279 TOPHILL COURT  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

20 CEDARWOOD COURT  
PALM COAST, FL 32137

## Current Mailing Address:

9279 TOPHILL COURT  
JACKSONVILLE, FL 32225

## New Mailing Address:

PO BOX 354150  
PALM COAST, FL 32135

FEI Number: 04-3721785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KIGHT, WILLIAM D  
9279 TOPHILL COURT  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

TURNER, DEBORAH V  
20 CEDARWOOD COURT  
PALM COAST, FL 32137 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: DEBORAH V TURNER

02/19/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TURNER, MICHAEL S  
Address: 20 CEDARWOOD CT.  
City-St-Zip: PALM COAST, FL 32137

Title: VD ( ) Delete  
Name: TURNER, DEBORAH V  
Address: 20 CEDARWOOD CT.  
City-St-Zip: PALM COAST, FL 32137

Title: TD ( ) Delete  
Name: KILLORAN, JOHN  
Address: 1295 WOODCREST LANE  
City-St-Zip: ST. LOUIS, MO 63042

Title: SD ( ) Delete  
Name: KIGHT, WILLIAM D DIRECTO  
Address: 9279 TOPHILL COURT  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: DEBORAH V TURNER

VP/D

02/19/2008

Electronic Signature of Signing Officer or Director

Date