

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000049914 (3)

1. Corporation Name

INTELLIGENT LIFE CORPORATION

Principal Place of Business	Mailing Address
2421 Bradley Place Palm Beach, FL 33480	241 Bradley Place Palm Beach, FL 33480

2. Principal Place of Business	2a. Mailing Address
21 11811 U.S. Highway One	26 11811 U.S. Hwy. One
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 North Palm Beach, FL	28 North Palm Beach, FL
Zip	Country
24 33408	25 USA
29 33408	30 USA

9. Name and Address of Current Registered Agent

Chauncey, Harrison K. Jr.
241 Bradley Place
Palm Beach, FL 33480

81 Name
82 Valdes-Pauli Corporate Services, Inc.
83 Street Address (P.O. Box Number is Not Acceptable)
84 777 So. Flagler Dr., Suite 500E
85 City
West Palm Beach FL 33401

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Michael V. Mitrione* Michael V. Mitrione, Vice President

12. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	Chauncey, Harrison K. Jr.	
STREET ADDRESS	241 Bradley Place	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	D/C	<input type="checkbox"/> DELETE
NAME	Morse, Peter C.	
STREET ADDRESS	200 Four Falls Corporate Ctr.	
CITY-ST-ZIP	West Conshocken, PA	
TITLE	D/P	<input type="checkbox"/> DELETE
NAME	Anderson, William P. III	
STREET ADDRESS	P. O. Box 088888	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Campbell, Sara	
STREET ADDRESS	P. O. Box 088888	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Lessin, Robert H.	
STREET ADDRESS	P. O. Box 088888	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Grayson, Bruns	
STREET ADDRESS	P. O. Box 088888	
CITY-ST-ZIP	North Palm Beach, FL 33408	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Christie, Karen	
13 STREET ADDRESS	P. O. Box 088888	
14 CITY-ST-ZIP	North Palm Beach, FL 33408	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE	D/P/CEO	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	Sr. V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	Sr. V/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Minford, Peter W.	
53 STREET ADDRESS	P. O. Box 088888	
54 CITY-ST-ZIP	North Palm Beach, FL 33408	
61 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	Caston, Robert	
63 STREET ADDRESS	P.O. Box 088888	
64 CITY-ST-ZIP	North Palm Beach, FL 33408	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.02(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual 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, and that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in the appointment with an address, with all other like empowered.

SIGNATURE: *Peter W. Minford, Sr.* Peter W. Minford, Sr. VP 2/15/99 (561) 630-1264



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/13/1993

4. FEI Number
65-0423422

5. Certificate of Status Desired Applied For Not Applicable
\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax Yes No

10. Name and Address of New Registered Agent

0156776

CD0503A 1111001