

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005134

Entity Name: LIFEMARK PARTNERS, INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

575 SOUTH CHARLES STREET
STE 505
BALTIMORE, MD 21201

New Principal Place of Business:

Current Mailing Address:

575 SOUTH CHARLES STREET
STE 505
BALTIMORE, MD 21201

New Mailing Address:

FEI Number: 88-0352979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WINGATE, REBECCA
Address: 12001 OPEN RUN RD
City-St-Zip: ELLICOTT CITY, MD

Title: V () Delete
Name: TESSLER, MICHAEL
Address: 13523 WESTON PARK DR.
City-St-Zip: TOWN & COUNTRY, MO

Title: V () Delete
Name: BLANK, MICHAEL
Address: 282 WINDING WAY
City-St-Zip: MERION, PA

Title: S () Delete
Name: CROWLEY, BARBARA
Address: 1669 NW 100TH PL
City-St-Zip: DES MOINES, IA

Title: C (X) Delete
Name: FLYNN, MICHAEL
Address: 5118 GENESTA AVE.
City-St-Zip: ENCINO, CA

Title: CFO () Delete
Name: SKLAR, MALCOM
Address: 20 THANKFUL BRADLEY RD
City-St-Zip: REDDING, CT

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:

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Address:
City-St-Zip:

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

SIGNATURE: REBECCA G WINGATE

P

01/25/2005

Electronic Signature of Signing Officer or Director

Date