## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F07000001821

Entity Name: MARBLELIFE WORLDWIDE, INC.

FILED Dec 04, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
300 NORTHSTAR CT SANFORD, FL 32771			
Current Mailing Address:		New Mailing Address:	
300 NORTHSTAR CT SANFORD, FL 32771			
FFI Number: 38-3110976	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FREITAG, JOHN E WILLIAMS, GERALD E 300 NORTHSTAR CT 300 NORTHSTAR CT US SANFORD, FL 32771 US SANFORD, FL 32771

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: GERALD E WILLIAMS 12/04/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

City-St-Zip:

ORANGE CITY, FL 32763

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete () Change () Addition WILLIAMS, GERALD E Name: Name: 4412 ENCHANTED OAKS DR Address: Address: City-St-Zip: ARLINGTON, TX 76016 City-St-Zip: Title: VC () Delete Title: () Change () Addition Name: WILLIAMS, POLLY Name: 4412 ENCHANTED OAKS DR Address: Address: ARLINGTON, TX 76016 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition WALLIS, CHARLES Name: MAYR, ALAN G Name: 1515 BRENDON LAKE DRIVE #211 2021 HILLCREST ST Address: Address: City-St-Zip: FT WORTH, TX 76107 City-St-Zip: ORANGE CITY, FL 32763 Title: DVP (X) Delete Title: () Change () Addition MAYR, ALAN Name: Name: Address: 11229 SANDHHILL DR Address: City-St-Zip: GRASS LAKE, MI 49240 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: FREITAG, JOHN E Name: Address: 718 BRIARCREST DR Address:

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

City-St-Zip:

SIGNATURE: GERALD E WILLIAMS С 12/04/2008