## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027497

Entity Name: GLOBAL LIFESTYLES TEAM, LLC

**FILED** Apr 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1950 W. CROWN POINTE BLVD 188 MUIRFIELD CIRCLE NAPLES, FL 34113 #207

NAPLES, FL 34112

**New Mailing Address: Current Mailing Address:** 

1950 W. CROWN POINTE BLVD 188 MUIRFIELD CIRCLE NAPLES, FL 34113 US

NAPLES, FL 34112 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Change () Addition () Delete

PALERMO, ROSEMARY J Name: Name: Address: 1950 W. CROWN POINTE BLVD. #207 Address: City-St-Zip: NAPLES, FL 34112 US City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: SEIFERT, PAULA Name: PITOCCHI, PATRICIA K Address: 3910 MIDSHORE DR. Address: 188 MUIRFIELD CIRCLE City-St-Zip: NAPLES, FL 34109 US City-St-Zip: NAPLES, FL 34113 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICIA K PITOCCHI **MGRM** 04/23/2008