

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002844

FILED
Apr 28, 2006
Secretary of State

Entity Name: HIGH FIVE LIFE DEVELOPMENT CORPORATION

Current Principal Place of Business:

21113 JOHNSON STREET
#120
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

21113 JOHNSON STREET
#120
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-1023345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALL, LATESSA
3061 SW 189TH TERRACE
MIRAMAR, FL 33029 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOMAX, WAYNE
Address: 2105 SW 166 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: HALL, BOBBY
Address: 16280 SW 14TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: LOMAX, TERESA
Address: 2105 SW 166 TERRACE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: LOMAX, TERESA
Address: 2105 SW 166 AVE
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the 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: WAYNE LOMAX

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date