2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004087

Entity Name: TOOLS FOR LIVING, INC.

FILED Sep 02, 2008 Secretary of State

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

3960 OAK TRAIL RUN
#2002 3960 OAK TRAIL RUN
PORT ORANGE, FL 32127

PORT ORANGE, FL 32127

Current Mailing Address: New Mailing Address:

P.O. BOX 291776 PORT ORANGE, FL 32129

FEI Number: 59-3741287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROBERTS, JOANNE M MRS.
3960 OAK TRAIL RUN
#2002
PORT ORANGE, FL 32127 US

ROBERTS, JOANNE M MRS.
3960 OAK TRAIL RUN
PORT ORANGE, FL 32127 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: 09/02/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 JOANNE, ROBERTS M MRS.
 Name:
 JOANNE, ROBERTS M MRS.

 Address:
 3960 OAK TRAIL RUN, #2002
 Address:
 3960 OAK TRAIL RUN

 City-St-Zip:
 PORT ORANGE, FL 32127
 City-St-Zip:
 PORT ORANGE, FL 32127

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

SIGNATURE: JOANNE ROBERTS PRES 09/02/2008