2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004467

Entity Name: SIMPLE LIVING INSTITUTE, INC.

FILED Apr 03, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	SHINGTON ST							
Current Mailing Address:				New Mailing Address:				
2517 E WA: ORLANDO,	SHINGTON ST FL 32803							
FEI Number:	82-0551617	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate	of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
SILVASY, TIARE F 2517 E WASHINGTON ST ORLANDO, FL 32803 US				SILVASY, LAINA M 2517 E WASHINGTON ST ORLANDO, FL 32803 US				
The above in the State		ubmits this statement for the pu	irpose of	f changing it	s registered	office or reg	gistered agent, or both,	
SIGNATURE: LAINA M SILVASY				04/03/2006				
	Electronic	Signature of Registered Ager	nt			D	ate	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGE:	s to offic	ERS AND DIRECTORS	:
Title: Name: Address: City-St-Zip:	C ()[SILVASY, TIARE 2517 E WASHING ORLANDO, FL 3	GTON ST		Title: Name: Address: City-St-Zip:	() Change()	Addition	
Title: Name: Address: City-St-Zip:	VC () [MULLIGAN, MAR 3041 GREENMO ORLANDO, FL 3	UNT RD		Title: Name: Address: City-St-Zip:	MULLIGAN, N 975 SEQUOIA			
Title: Name: Address: City-St-Zip:	D ()E WEXLER, LAWR 8101 EDEN PAR ORLANDO, FL 3	K RD.		Title: Name: Address: City-St-Zip:	EHRING, SUS 407 E. CENTE			
Title: Name: Address: City-St-Zip:	DT () [SILVASY, LAINA 2517 E WASHING ORLANDO, FL 3	GTON ST		Title: Name: Address: City-St-Zip:	T (SILVASY, LAI 2517 E WASH ORLANDO, FI	HINGTON ST	Addition	
Title: Name: Address: City-St-Zip:	DS () EREIS, REBECCA 3054A GEORGE WINTER PARK, I	MASON AVE		Title: Name: Address: City-St-Zip:	S (BRENNAN, S [*] 1910 E HARD ORLANDO, FI	ING ST	Addition	
Title: Name: Address: City-St-Zip:	D ()E SILVASY, SHIRL 10001 CREEKW ORLANDO, FL 3	ATER BLVD		Title: Name: Address: City-St-Zip:	() Change()	Addition	

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: LAINA M SILVASY T 04/03/2006