

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006223

FILED  
Aug 18, 2003  
Secretary of State

Entity Name: WAY OF LIFE - WESLEY CHAPEL, INC.

## Current Principal Place of Business:

30725 LITTLE POND LANE  
WESLEY CHAPEL, FL 33544

## New Principal Place of Business:

35380 STATE ROAD 54  
ZEPHYRHILLS, FL 33541

## Current Mailing Address:

30725 LITTLE POND LANE  
WESLEY CHAPEL, FL 33544

## New Mailing Address:

FEI Number: 01-0621804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARMAN, GUY  
4747 HOLLYWOOD BLVD #274  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

BLACKLEDGE, HARRY C  
30725 LITTLE POND LANE  
WESLEY CHAPEL, FL 33544 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: HARRY C BLACKLEDGE III

08/18/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLACKLEDGE, HARRY C III  
Address: 30725 LITTLE POND LANE  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D ( ) Delete  
Name: BLACKLEDGE, APRIL  
Address: 30725 LITTLE POND LANE  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D ( ) Delete  
Name: HALL, LISA  
Address: 706 CHADSWORTH  
City-St-Zip: SEFFNER, FL 33584

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARRY C BLACKLEDGE III

D

08/18/2003

Electronic Signature of Signing Officer or Director

Date