

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2005 8:00 am
Secretary of State

07-28-2005 90004 043 ****61.25

DOCUMENT # N02000009416

1. Entity Name
LIFESTYLE SOLUTIONS GROUP, INC.



Principal Place of Business
1942 HIGHWAY 87 SOUTH
NAVARRE, FL 32566

Mailing Address
1942 HIGHWAY 87 SOUTH
NAVARRE, FL 32566

50058257



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07192005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
51-0474074

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PULLUM, JEANNE
2845 PEBBLE BEACH DR.
NAVARRE, FL 32566

Name
David G. White, Esquire

Street Address (P.O. Box Number is Not Acceptable)
204 Church Street East

City Pensacola FL Zip Code 32502

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE CEO ☐ Delete
NAME PULLUM, JEANNE
STREET ADDRESS 1942 HIGHWAY 87 SOUTH
CITY-ST-ZIP NAVARRE, FL 32566

TITLE DIR ☒ Delete
NAME MAYES, JOSEPH L
STREET ADDRESS 2256 LEMURE DRIVE
CITY-ST-ZIP NAVARRE, FL 32566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CEO/DIRECTOR ☐ Change ☒ Addition
NAME Pullum, Jeanne
STREET ADDRESS 1942 Highway 87 South
CITY-ST-ZIP Navarre, Florida 32566

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #