2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003064

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FILED Apr 14, 2009 Secretary of State

Entity Name: LIVES UNDER CONSTRUCTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 3001 58TH AVENUE SOUTH #509 ST PETERSBURG, FL 33712 **Current Mailing Address: New Mailing Address:** C/O TEMPLE H. DRUMMOND, ESQ. 6987 EAST FOWLER AVENUE TAMPA, FL 33617 FEI Number: 26-2294029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DRUMMOND, TEMPLE H ESQ. 6987 EAST FÓWLER AVENUE TAMPA, FL 33617 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HUDSON, ANDRE Name: Name: 3001 58TH AVE SOUTH #509 Address: Address: City-St-Zip: ST PETERSBURG, FL 33712 City-St-Zip: Title: () Delete Title: (X) Change () Addition GABBARD, DEXTER Name: LAVELY, STEVEN G Name: Address: 301 8TH AVE NORTH Address: 101 RIVERFRONT BLVD., SUITE 120 City-St-Zip: ST PETERSBURG, FL 33701 City-St-Zip: BRADENTON, FL 34205 Title: () Delete Title: () Change () Addition STEIN, DANIEL Name: Name: Address: 413 6TH AVENUE NORTH Address: City-St-Zip: TIERRA VERDE, FL 33715 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GRUBBS, GERALD Name: 647 MAC EWEN DRIVE Address: Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: Title: () Delete Title: () Change () Addition MATZ, GEORGE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ANDRE HUDSON D 04/14/2009

7343 SAWGRASS POINT DRIVE

PINELLAS PARK, FL 33782

Address:

City-St-Zip: