

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003784

FILED
Apr 14, 2010
Secretary of State

Entity Name: LIVE BREATHE SCIENCE, INC,

Current Principal Place of Business:

214 LENOX ST.
LAKELAND, FL 33803 US

New Principal Place of Business:

1628 S. FLORIDA AVE.
LAKELAND, FL 33803 US

Current Mailing Address:

214 LENOX ST.
LAKELAND, FL 33803 US

New Mailing Address:

FEI Number: 26-4603673 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHAPMAN, ANGELA M
214 LENOX ST.
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

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:

Title: P
Name: CHAPMAN, ANGELA M
Address: 214 LENOX ST.
City-St-Zip: LAKELAND, FL 33803 US

Title: VP
Name: CRAVEN, PAMELA
Address: 13 LOMA ALTA
City-St-Zip: LAKELAND, FL 33813

Title: S
Name: HUTCHINSON, ROBIN
Address: 8854 MOUNT ROYAL LN
City-St-Zip: LAKELAND, FL 33809 US

I hereby 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 all other like empowered.

SIGNATURE: ANGELA CHAPMAN

P

04/14/2010

Electronic Signature of Signing Officer or Director

Date