

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42423

FILED
Aug 16, 2004
Secretary of State**Entity Name:** LIFE MANAGEMENT INSTITUTE, INC.**Current Principal Place of Business:**5720 LAKESIDE DR
#619
MARGATE, FL 33063 US**New Principal Place of Business:**934 N. UNIVERSITY DRIVE
#333
CORAL SPRINGS, FL 33071 US**Current Mailing Address:**5720 LAKESIDE DR
#619
MARGATE, FL 33063 US**New Mailing Address:**934 N. UNIVERSITY DRIVE
#333
CORAL SPRINGS, FL 33071 US**FEI Number:** 65-0252236**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILLIAMS, DENNIS P.
5720 LAKESIDE DR
#619
MARGATE, FL 33063 US**Name and Address of New Registered Agent:**WILLIAMS, DENNIS P.
934 N. UNIVERSITY DRIVE
#333
CORAL SPRINGS, FL 33071 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: _____

08/16/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: WILLIAMS, DENNIS P.,
Address: 5720 LAKESIDE DR #619
City-St-Zip: MARGATE, FL 33063Title: DT () Delete
Name: BENING, STEPHEN L
Address: 5720 LAKESIDE DR #619
City-St-Zip: MARGATE, FL 33063Title: D () Delete
Name: WILLIAMS, JUDY
Address: 153 W BAYRIDGE DR
City-St-Zip: WESTON, FL 33326Title: D () Delete
Name: LARALAMERS, PEGGY
Address: 153 W BAYRIDGE DR
City-St-Zip: WESTON, FL 33326Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: WILLIAMS, DENNIS P.,
Address: 934 N. UNIVERSITY DRIVE, #333
City-St-Zip: CORAL SPRINGS, FL 33071Title: DT (X) Change () Addition
Name: BENING, STEPHEN L
Address: 934 N. UNIVERSITY DRIVE, #333
City-St-Zip: CORAL SPRINGS, FL 33071Title: D (X) Change () Addition
Name: WILLIAMS, JUDY
Address: 934 N. UNIVERSITY DRIVE, #333
City-St-Zip: CORAL SPRINGS, FL 33371Title: D (X) Change () Addition
Name: CAVALANCIA, PEGGY
Address: 934 N. UNIVERSITY DRIVE, #333
City-St-Zip: CORAL SPRINGS, FL 33371Title: D () Change (X) Addition
Name: LEINA, LEBRON
Address: 934 N. UNIVERSITY DRIVE, #333
City-St-Zip: CORAL SPRINGS, FL 33071

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: DENNIS P. WILLIAMS

D

08/16/2004

Electronic Signature of Signing Officer or Director

Date