

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90946 033 ****61.25

DOCUMENT # N99000002453

1. Entity Name
LIFETIDES HOME, INC.



Principal Place of Business

**3133 LAS OLAS DRIVE
DUNEDIN FL 34698
US**

Mailing Address

**3438 EAST LAKE RAD.
SUITE 14, PMB 650
PALM HARBOR FL 34685**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3450873**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GIMENO, SUE
2095 OTTER WAY
PALM HARBOR FL 34685**

7. Name and Address of New Registered Agent

Name

Sue Di Lenge

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

3710 OLD KEYSTONE RD

City

TARPON SPRINGS

FL

Zip Code

34688

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

Sue Di Lenge

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

(NOTE: Registered Agent signature required when reinstating)

DATE

X 4-7-03

FILE NOW: FEE IS \$61.25

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 **D** ☐ Delete
NAME **GIMENO, SUE**
STREET ADDRESS **2095 OTTER WAY**
CITY-ST-ZIP **PALM HARBOR FL 34685**

TITLE **D** ☐ Delete
NAME **LAWSON, ROBERTA**
STREET ADDRESS **3945 FIRST AVE. S**
CITY-ST-ZIP **ST PETERSBURG FL 33711**

TITLE **D** ☐ Delete
NAME **BEAVERS, GERALDINE**
STREET ADDRESS **273 DIOGNES ST.**
CITY-ST-ZIP **PALM HARBOR FL 34683**

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 ☒ Change ☐ Addition
NAME
STREET ADDRESS **3710 OLD KEYSTONE RD**
CITY-ST-ZIP **TARPON SPRINGS, FL 34688**

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

TITLE ☐ Change ☐ Addition
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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: X

Sue Di Lenge

X 4-7-03 727-804-4500

CR2E037 (10/02)