

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90039 032 ****70.00

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1. Entity Name

LIVING HIS LIFE ABUNDANTLY INTERNATIONAL,
INC.



Principal Place of Business

325 SCARLET BLVD.
OLDSMAR FL 34677

Mailing Address

325 SCARLET BLVD.
OLDSMAR FL 34677

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3581170

Applied For

Not Applicable

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

1st MOORE CR2E037 (10/07)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERSTAC, RITA
3463 TARPON WOODS BLVD.
PALM HARBOR FL 34685

Name

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

City

FL

Zip Code

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 is required when reinstating)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2008

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 PD
NAME BENKOVIC, JOHNNETTE S ☐ Delete
STREET ADDRESS 2245 TONIWOOD LANE
CITY- ST- ZIP PALM HARBOR FL 34685

TITLE VPD
NAME BENKOVIC, ANTHONY J ☒ Delete
STREET ADDRESS 2245 TONIWOOD LANE
CITY- ST- ZIP PALM HARBOR FL 34685 **DECEASED**

TITLE STD
NAME MOORE, M. SCOTT ☐ Delete
STREET ADDRESS 1583 BERING COURT
CITY- ST- ZIP PALM HARBOR FL 34683

TITLE D
NAME BRUSKEWITZ, REV. FABIAN ☐ Delete
STREET ADDRESS 3400 SHERIDAN BLVD.
CITY- ST- ZIP LINCOLN NE 68506

TITLE D
NAME LOCKWOOD, ROBERT P ☐ Delete
STREET ADDRESS 111 BLVD OF ALLIES
CITY- ST- ZIP PITTSBURGH PA 15222

TITLE D
NAME ANDERSON, MARY J ☐ Delete
STREET ADDRESS 3219 WALD RD.
CITY- ST- ZIP ORLANDO FL 32806

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME KATHLEEN MATHIESON-HILLARY ☐ Change ☒ Addition
STREET ADDRESS 1608 KENNESAW DR.
CITY- ST- ZIP CLERMONT, FL 34711

TITLE D
NAME RITA PERSTAC ☐ Change ☒ Addition
STREET ADDRESS 3463 TARPON WOOD BLVD.
CITY- ST- ZIP PALM HARBOR, FL 34685

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 exemptions contained in Section 119, 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 filers empowered.

SIGNATURE:

Johnette Benkovic

4/8/08

813-854-1518