2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

STE 208

2963 GULF TO BAY

P00000000445 **DOCUMENT #**

1. Entity Name

Principal Place of Business

2963 GULF TO BAY

STE 208

LIFE BROKERAGE EQUITY GROUP, INC.



FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 91784 046 ***150.00

CLEARWATER FL 33759	ARWATER FL 33759		CLEARWATER FL 33759					
2. Principal Place of Business 2963 GULF-TO-BAY BLVD 2963 GULF-TO-D			- Roy F	2,42	4 1987 1887 1717 88171 88171 88171 88171	EBIJI BOJIH BOSHI RDISH DIDH BI	1001 0111 1001	
Suite, Apt. #, etc. Suite, Apt. #, etc.) - CHT L	200	TO CHECK HERE IF	F MAKING CHANGES		
STE 330 City & State		STE 330 Dity & State					aliad Car	
CLEARWAT	ER, FL	CLEARWATER	, FL		4. FEI Number 65-0972017	├ ─-+-∸	oplied For ot Applicable	
Zip 33759	Country PINELLAS	Zip 33759	Country PINELLA		5. Certificate of Status Desired	S8.75 Add		
6. Name and Address of Current Registered Agent			TIVE CCF		7. Name and Address of New Registered Agent			
DI ONIO OPPODRY I			Name	Name				
BLODIG, GREGORY J 100 W. CYPRESS CREEK ROAD			Street A	Street Address (P.O. Box Number is Not Acceptable)				
SUITE 700								
FT. LAUDERDALE FL 33309			City			FL Zip Code	 9	
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 required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00								
After May 1, 2003 Fee will be \$550.00					 Election Campaign Fina Trust Fund Contribution. 	+ + + + + + + + + + + + + + + + + +	O May Be I to Fees	
Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11.								
TITLE D	OFFICERS AND D	Delete Delete	11.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS	S IN 11 Addition	
	K, MICHAEL G	C Delete	NAME	İ		change		
	IIVERSITY DRIVE, SUITE 10	00	STREET ADDRESS					
	SPRINGS FL 33071	Delete	CITY-ST-ZIP		<u> </u>		P=1 a sec	
	ROBERT	₩ Delete	TITLE NAME			Change	Addition	
STREET ADDRESS 1700 UN	IVERSITY DRIVE, SUITE 10	00	STREET ADDRESS					
	SPRINGS FL 33071		CITY-ST-ZIP	<u> </u>				
TITLE P P P P P P P P P P P P P P P P P P P	OSON, GARY A	Delete	TITLE NAME	Kicha	rdson, Gary.	Change	☐ Addition	
	ILF TO BAY BLVD STE 208	3	STREET ADDRESS	1963	Gulf to Bay Ste.	330		
	ATER FL 33759		CITY-ST-ZIP	Clea	dent Gulf to Bay Ste. rwater, FL 3375	-9	·	
TITLE COOS NAME BEARD	STEPHEN	Delete	TITLE NAME			☐ Change	☐ Addition	
	LF TO BAY BLVD		STREET ADDRESS					
	ATER FL 33759		CITY-ST-ZIP			.	·	
TITLE		☐ Delete	TITLE		IN BECHTEL	☐ Change	▼ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	VICE	5- PRESIDENT	BULL STE	330	
CITY-ST-ZIP			CITY-ST-ZIP	CLEA	GULF-TO-BAY	33769		
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	1				
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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 607, 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: