

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90114 032 ***150.00

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1. Entity Name
LIFETIME OF HEALTH, INC.



Principal Place of Business
10333 150TH COURT N
JUPITER FL 33478

Mailing Address
10333 150TH COURT N
JUPITER FL 33478

2. Principal Place of Business

601 H Muirfield Ct.
Suite, Apt. #, etc.

3. Mailing Address

601 H Muirfield Ct.
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Jupiter FL

City & State
Jupiter FL

4. FEI Number 65-1008365

Applied For
Not Applicable

Zip 33458 Country USA

Zip 33458 Country USA

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

6. Name and Address of Current Registered Agent

JOHNSON, CHRISTINA M
10333 150TH COURT N
JUPITER FL 33478

7. Name and Address of New Registered Agent

Name Christina M. Johnson

Street Address (P.O. Box Number is Not Acceptable)
601 H Muirfield Ct.

City Jupiter FL Zip Code 33458

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 Christina M. Johnson - Registered Agent
Signature, typed or printed name of registered agent and title if applicable. (NO Registered Agent signature required when reinstating)

3/30/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003, Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME JOHNSON, CHRISTINA M
STREET ADDRESS 10333 150TH COURT N
CITY-ST-ZIP JUPITER FL 33478 ☐ Delete

TITLE VP
NAME COOPER, MARC J
STREET ADDRESS 10333 150TH CT N
CITY-ST-ZIP JUPITER FL 33478 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President
NAME Christina M. Johnson
STREET ADDRESS 601 H Muirfield Ct.
CITY-ST-ZIP Jupiter, FL 33458 ☒ Change ☐ Addition

TITLE V.P.
NAME Marc J. Cooper
STREET ADDRESS 601 H Muirfield Ct
CITY-ST-ZIP Jupiter FL 33458 ☒ Change ☐ Addition

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

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

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

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

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: Christina M. Johnson - President 3/30/03 407-746-5207
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)