2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060160

Entity Name: LIFESTYLES HOME SALES, INC.

FILED Feb 26, 2004 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
715 MABBE KISSIMMEE					
Current Mailing Address:			New Mailin	New Mailing Address:	
715 MABBETTE ST KISSIMMEE, FL 34741					
FEI Number:	59-3658551	FEI Number Applied For() FE	l Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
WANDA, LINSCOTT 715 MABBETTE STREET KISSIMMEE, FL 34741 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.					
SIGNATUR		Cincolne of Denistrand Asset		Dete	
Electronic Signature of Registered Agent				Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () I LINSCOTT, WAN 714 MABBETTE KISSIMMEE, FL	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD ()[QUIGLEY, JENN 1245 NE 20 PL GAINESVILLE, F	ACE	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition QUIGLEY, JENNIFER 715 MABBETTE STREET KISSIMMEE, FL 34741	
Title: Name: Address: City-St-Zip:	D () I WAYNE, LINSCO 4213 REAVES F KISSIMMEE, FL	ROAD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LINSCOTT, WAYNE E SR 715 MABBETTE STREET KISSIMMEE, FL 34741	
Title: Name: Address: City-St-Zip:	D ()[QUIGLEY, STEP 715 MABBETTE KISSIMMEE, FL	HANIE STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I MOSLEY, ELIZA 715 MABBETTE KISSIMMEE, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition LINSCOTT, NICHOLAS R 715 MABBETTE STREET KISSIMMEE, FL 34741	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WANDA M. LINSCOTT D 02/26/2004

WAYNE E. LINSCOTT, SR 715 MABBETTE STREET KISSIMMEE FL 34741