

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90092 048 \*\*\*150.00

DOCUMENT # P02000134971

1. Entity Name  
WISDOM FOR LIVING, INC.



Principal Place of Business  
~~1010 LAKELAND HILLS BLVD~~  
LAKELAND, FL 33805

Mailing Address  
~~1910 LAKELAND HILLS BLVD~~  
LAKELAND, FL 33805

40054555



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

40124 Hwy 27  
Suite, Apt. #, etc.  
Suite 104

3. Mailing Address

40124 Hwy 27  
Suite, Apt. #, etc.  
Suite 104

01292007 Chg-P CR2E034 (12/06)

City & State  
Davenport, FL  
Zip 33837 Country USA

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Davenport, FL  
Zip 33837 Country USA

4. FEI Number  
56-2309775  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

VANKORLAAR, KEVIN R CEO  
1910 LAKELAND HILLS BLVD  
LAKELAND, FL 33805

7. Name and Address of New Registered Agent

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 required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME CEO  
STREET ADDRESS VANKORLAAR, KEVIN  
CITY - ST - ZIP 1910 LAKELAND HILLS BLVD  
LAKELAND, FL 33805 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME CEO  
STREET ADDRESS Vankorlaar, Kevin  
CITY - ST - ZIP 40124 Hwy 27, Ste. 104  
Davenport, FL 33837 ☒ Change ☐ Addition

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

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

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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 exemptions contained in Chapter 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Kevin Vankorlaar* Kevin Vankorlaar 2/11/07 (321) 946-3541