

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056288

Entity Name: RESORT TO LIVING, INC.

FILED  
Jul 04, 2004  
Secretary of State

## Current Principal Place of Business:

229 LONGVIEW AVE., #102  
CELEBRATION, FL 34747

## New Principal Place of Business:

229 LONGVIEW AVE.  
102  
CELEBRATION, FL 34747

## Current Mailing Address:

229 LONGVIEW AVE., #102  
CELEBRATION, FL 34747

## New Mailing Address:

229 LONGVIEW AVE.  
102  
CELEBRATION, FL 34747

FEI Number: 01-0792757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LILES, KENNETH  
229 LONGVIEW AVE., #102  
CELEBRATION, FL 34747 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LILES, KENNETH  
Address: 229 LONGVIEW AVE., #102  
City-St-Zip: CELEBRATION, FL 34747

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CO-P (X) Change ( ) Addition  
Name: LILES, KENNETH  
Address: 229 LONGVIEW AVE., #102  
City-St-Zip: CELEBRATION, FL 34747

Title: CO-P ( ) Change (X) Addition  
Name: LILES, PATRICIA  
Address: 229 LONGVIEW AVE., #102  
City-St-Zip: CELEBRATION, FL 34747

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: KEN LILES

CO-P

07/04/2004

Electronic Signature of Signing Officer or Director

Date