

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000150274

Entity Name: LIVENS ENTERPRISES, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

243 W. PARK AVENUE
SUITE 201
WINTER PARK, FL 32789

New Principal Place of Business:

189 CHAUCER AVENUE
DAVENPORT, FL 33896 US

Current Mailing Address:

243 W. PARK AVENUE
SUITE 201
WINTER PARK, FL 32789

New Mailing Address:

189 CHAUCER AVENUE
DAVENPORT, FL 33896

FEI Number: 20-1830019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSEN, ERIK C
243 W. PARK AVENUE
SUITE 201
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

LONGHORN, IAN
189 CHAUCER AVENUE
DAVENPORT, FL 33896 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.

SIGNATURE: IAN LONGHORN

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LIVENS, TERRENCE
Address: 272 CALABAY PARK BLVD.
City-St-Zip: DAVENPORT, FL 33897

Title: VPD () Delete
Name: LIVENS, RUTH
Address: 272 CALABAY PARK BLVD.
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LIVENS, TERRENCE
Address: 189 CHAUCER AVENUE
City-St-Zip: DAVENPORT, FL 33896

Title: VPD (X) Change () Addition
Name: LIVENS, RUTH
Address: 189 CHAUCER AVENUE
City-St-Zip: DAVENPORT, FL 33896

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: TERENCE LIVENS

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

Date