

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114099

Entity Name: ACTIONS 4 LIFE, INC.

FILED
Jul 24, 2007
Secretary of State

Current Principal Place of Business:

715 RIVIERA DUNES WAY
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

715 RIVIERA DUNES WAY
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 20-5482766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JS PERFORMANCE CONSULTING, INC.
715 RIVIERA DUUNES WAY
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

STUDER, THOMAS L MR
715 RIVIERA DUUNES WAY
PALMETTO, FL 34221 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: THOMAS L STUDER

07/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STUDER, THOMAS
Address: 715 RIVIERA DUNES WAY
City-St-Zip: PALMETTO, FL 34221

Title: VP () Delete
Name: STUDER, JOANNE
Address: 715 RIVIERA DUNES WAY
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: THOMAS L STUDER

PRES

07/24/2007

Electronic Signature of Signing Officer or Director

Date