

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155733

FILED  
Aug 31, 2009  
Secretary of State

Entity Name: LYFE MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

11825 ISLAND LAKES LANE  
BOCA RATON, FL 33498 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 824114  
SOUTH FLORIDA, FL 33082 US

## New Mailing Address:

11825 ISLAND LAKES LANE  
BOCA RATON, FL 33498 US

FEI Number: 20-8093462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WRAY, JULIEN  
11825 ISLAND LAKES LN  
BOCA RATON, FL 33498 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WRAY, JULIEN  
Address: P.O. BOX 824114  
City-St-Zip: SOUTH FLORIDA, FL 33082 US

Title: S/T ( ) Delete  
Name: WRAY, STEPHANIE  
Address: P.O. BOX 824114  
City-St-Zip: SOUTH FLORIDA, FL 33082 US

## 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: JULIEN WRAY

P

08/31/2009

Electronic Signature of Signing Officer or Director

Date