2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000093750

Entity Name: LION LIFE, INC.

Title:

Name:

Address: City-St-Zip: TD

() Delete

1240 US HWY# 1, SUITE 100

NORTH PALM BEACH, FL 33408

HANLEY, WILLIAM T

FILED May 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1240 US HWY #1, SUITE 100 LION LIFE BUILDING NORTH PALM BCH, FL 33408 **New Mailing Address: Current Mailing Address:** 1240 US HWY #1, SUITE 100 NORTH PALM BCH, FL 33408 FEI Number: 74-3231210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BISHINS, LARRY V ESQ. COOK, ROBERT B ESQ. 4548 NORTH FEDERAL HIGHWAY 17 BAÝ HARBOUR TEQUESTA, FL 33469 US FORT LAUDERDALE, FL 33308 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: ROBERT B. COOK, ESQ. 05/22/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CPD () Delete Title: () Change () Addition KEHLE, ANTHONY G. III Name: Name: 1240 US HWY #1, SUITE 100 Address: Address: City-St-Zip: NORTH PALM BCH, FL 33408 City-St-Zip: () Delete Title: SD Title: () Change () Addition Name: CAPUANO, EDWARD Name: 1240 US HWY #1, SUITE 100 Address: Address: NORTH PALM BCH, FL 33408 City-St-Zip: 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ANTHONY G. KEHLE, III CPD 05/22/2009

() Change () Addition