# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# P08000033084

**Entity Name:** INTEGRATIVE LIFE FOR YOU INC

**Current Principal Place of Business:**

401 S PARSONS AVE
SUITE A
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

401 S PARSONS AVE
SUITE A
BRANDON, FL 33511 US

**New Mailing Address:**

**FEI Number: 26-2315986** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SAPROUNOVA, VERA
4611 RIVER OVERLOOK DRIVE
VALRICO, FL 33596 US

**Name and Address of New Registered Agent:**

LELA, LILYQUIST
1024 MEADOW LANE
BRANDON, FL 33511 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: LELA LILYQUIST 04/30/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: SAPROUNOVA, VERA
Address: 4611 RIVER OVERLOOK DRIVE
City-St-Zip: VALRICO, FL 33596

Title: VP (X) Delete
Name: LILYQUIST, LELA
Address: 401 S PARSONS AVE SUITE A
City-St-Zip: BRANDON, FL 33511

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: LELA, LILYQUIST
Address: 1024 MEADOW LANE
City-St-Zip: BRANDON, FL 33511

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: LELA LILYQUIST P 04/30/2009
Electronic Signature of Signing Officer or Director Date