

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000102843

FILED
Apr 30, 2011
Secretary of State

Entity Name: MAXIMIZED LIVING MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

610 SYCAMORE STREET
SUITE 340
CELEBRATION, FL 34747 US

New Principal Place of Business:

1420 CELEBRATION BLVD.
SUITE 200
CELEBRATION, FL 34747 US

Current Mailing Address:

610 SYCAMORE STREET
SUITE 340
CELEBRATION, FL 34747 US

New Mailing Address:

1420 CELEBRATION BLVD.
SUITE 200
CELEBRATION, FL 34747 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERNER, BEN
604 FRONT STREET
CELEBRATION, FL 34747 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

OFFICERS AND DIRECTORS:

Title: D
Name: LERNER, BEN
Address: 610 SYCAMORE STREET, STE. 340
City-St-Zip: CELEBRATION, FL 34747 US

Title: D
Name: LOMAN, GREG
Address: 610 SYCAMORE STREET, STE. 340
City-St-Zip: CELEBRATION, FL 34747 US

Title: P
Name: HART, SHEL A
Address: 1420 CELEBRATION BLVD., STE. 200
City-St-Zip: CELEBRATION, FL 34747 US

I hereby 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 all other like empowered.

SIGNATURE: SHEL A. HART

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date