

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P37110

FILED
Oct 10, 2012
Secretary of State

Entity Name: GOOD LIFE RESORTS, INC.

Current Principal Place of Business:

180 SOUTH BROADWAY
BARTOW, FL 33830

New Principal Place of Business:

6815 STATE ROAD 60 E
BARTOW, FL 33830

Current Mailing Address:

180 SOUTH BROADWAY
BARTOW, FL 33830

New Mailing Address:

FEI Number: 86-0672931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFRIES, WILLIE MAY
180 SOUTH BROADWAY
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

JEFFRIES, DONNA
180 SOUTH BROADWAY
BARTOW, FL 33830 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: DONNA JEFFRIES

10/10/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCP
Name: KILBOURNE, ROBERT
Address: 6815 HWY 60 E
City-St-Zip: BARTOW, FL

Title: VP
Name: EDGLEY, JACQUILINE
Address: 6815 HWY 60 EAST
City-St-Zip: MULBERRY, FL 33860

Title: S
Name: EDGLEY, JACQUELINE
Address: 6815 HWY 60 E
City-St-Zip: BARTOW, FL

Title: D
Name: JOHN EDGLEY
Address: 5056 N 83RD STREET
City-St-Zip: SCOTTSDALE, AZ

Title: D
Name: GRADY, KENDRA R
Address: 6815 HWY 60 E
City-St-Zip: BARTOW, FL 33830

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: ROBERT KILBOURNE

PRES

10/10/2012

Electronic Signature of Signing Officer or Director

Date