

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000020417

FILED
Jan 15, 2004
Secretary of State

Entity Name: LIFESTYLE ADVANTAGE, INC.

Current Principal Place of Business:

3100 PINEWOOD CT.
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

3100 PINEWOOD CT.
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-3172469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SONSTEGARD, ARV
3100 PINEWOOD COURT
KISSIMMEE, FL 34746 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SONSTEGARD, ARV
Address: 3100 PINEWOOD CT
City-St-Zip: KISSIMMEE, FL

Title: D () Delete
Name: LANDRY, CATHERINE
Address: 3100 PINEWOOD CT
City-St-Zip: KISSIMMEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SONSTEGARD, ARV
Address: 3100 PINEWOOD CT
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Change () Addition
Name: LANDRY, CATHERINE
Address: 3100 PINEWOOD CT
City-St-Zip: KISSIMMEE, FL 34746

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARVID SONSTEGARD

PRES

01/15/2004

Electronic Signature of Signing Officer or Director

Date