

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000006353

FILED
May 03, 2005
Secretary of State

Entity Name: TOTAL LIFESTYLES INCORPORATED

Current Principal Place of Business:

442 S. NORTHLAKE BLVD.
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

505 PARK AVE. N
SUITE 205
WINTER PARK, FL 32789 US

Current Mailing Address:

P.O. BOX 940340
MAITLAND, FL 327940340 US

New Mailing Address:

FEI Number: 58-2384626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMM, JOSEPH D
442 S. NORTHLAKE BLVD.
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

ROEN, HAL
505 PARK AVE. N.
SUITE 205
WINTER PARK, FL 32789 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: HAL ROEN

05/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LAMM, DEBRA A
Address: 442 S. NORTHLAKE BLVD.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LAMM, DEBRA A
Address: 505 PARK AVE. N
City-St-Zip: WINTER PARK, FL 32789

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: DEBRA A. LAMM

PRES

05/03/2005

Electronic Signature of Signing Officer or Director

Date