

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000072238

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: LIFESTYLE CHOICE REALTY, INC.

## Current Principal Place of Business:

2379 ERSOFF BLVD. NE  
PALM BAY, FL 32905 US

## New Principal Place of Business:

## Current Mailing Address:

1498 WAUKON CIRCLE  
CASSELBERRY, FL 32707 US

## New Mailing Address:

FEI Number: 59-3526792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORMAN, WILLIAM D  
1498 WAUKON CIRCLE  
CASSELBERRY, FL 32707 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: P ( ) Delete  
Name: GORMAN, WILLIAM D  
Address: 1498 WAUKON CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

Title: S ( ) Delete  
Name: GORMAN, DEBORAH A  
Address: 1498 WAUKON CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

Title: T ( ) Delete  
Name: Korp, KATE P  
Address: 765 TYLER DRIVE  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: Korp, WILLIAM  
Address: 765 TYLER DRIVE  
City-St-Zip: SARASOTA, FL 34236

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH A. GORMAN

S

04/18/2007

Electronic Signature of Signing Officer or Director

Date