2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 02, 2000 8:00 am
Secretary of State
08-02-2000 90157 028 ***150.00

DOCUMENT # P99000079915

Entity Name
INNOVATIVE LIFESTYLES, INC.

R

Principal Place of Business	Mailing Address
MEADOWBROOK CIRCLE BEACH FL 32114	1255 MASON AVE. DAYTONA BEACH FL 32117

DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	109 MEADOW BROOK CIRCLE Suite, Apt. #, etc.
City & State	City & State: DAYTONA BEACH FL
Zip / Country	Zip: 32114 / Country: VOLUSIA

4. FEI Number: 59-3548376 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVE.
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: RICHARD K. CHURCHMAN
Street Address (P.O. Box Number is Not Acceptable): 1255 MASON AVENUE
City: DAYTONA BEACH **FL** Zip Code: 32117

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: Richard K Churchman 7.7.00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PD NAME: ROLAND, SHAWN D STREET ADDRESS: 109 MEADOWBROOK CIRCLE CITY-ST-ZIP: DAYTONA BEACH FL 32114	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: STD NAME: O'LEARY, BERNADETTE M STREET ADDRESS: 109 MEADOWBROOK CIRCLE CITY-ST-ZIP: DAYTONA BEACH FL 32114	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (5/00)

I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bernadette M O'Leary July 10, 2000 (904) 258-2662
SIGNATURE AND TITLE OF CHIEF EXECUTIVE OFFICER OF CORPORATION DATE PHONE