

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S56967

FILED
Apr 27, 2009
Secretary of State

Entity Name: PERSONAL BEST LIFESTYLE, INC.

Current Principal Place of Business:

235 N. AMELIA AVE.
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

235 N. AMELIA AVE.
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-3068708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, SYLVAN A.
618 N. WILD OLIVE AVE.
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

GOLDEN, DOUGLAS W
50 MAGNOLIA AVE
ORMOND BEACH, FL 32174 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: DOUGLAS W. GOLDEN

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LONG, RAYMOND F.
Address: 1884 PALMETTO DR
City-St-Zip: DELAND, FL 32724

Title: D () Delete
Name: WELLS, SYLVAN A.
Address: 618 N. WILD OLIVE AVE
City-St-Zip: DAYTONA BEACH, FL

Title: D (X) Delete
Name: LONG, CAROL
Address: 1884 PALMETTO DR
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOLDEN, DOUGLAS, W
Address: 235 N. AMELIA AVE.
City-St-Zip: DELAND, FL 32724

Title: D (X) Change () Addition
Name: GOLDEN, LOIS, A
Address: 235 N. AMELIA AVE
City-St-Zip: DELAND,, FL 32724

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

I hereby certify that the information supplied with this filing does not qualify 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: DOUGLAS W. GOLDEN

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date