

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003940

Entity Name: HERBALSCIENCE, INC.

FILED  
Apr 07, 2010  
Secretary of State

**Current Principal Place of Business:**

1004 COLLIER CENTER WAY, SUITE 200  
#200  
NAPLES, FL 34110

**New Principal Place of Business:**

1004 COLLIER CENTER WAY, SUITE 200  
NAPLES, FL 34110

**Current Mailing Address:**

1004 COLLIER CENTER WAY, SUITE 200  
#200  
NAPLES, FL 34110

**New Mailing Address:**

1004 COLLIER CENTER WAY, SUITE 200  
NAPLES, FL 34110

FEI Number: 26-0655719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: COO  
Name: MCCLELLAND, JOHN M  
Address: 1004 COLLIER CENTER WAY, SUITE 200  
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: JOHN MCCLELLAND

COO

04/07/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date