

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M99051

FILED
Mar 23, 2011
Secretary of State

Entity Name: NUTRI-WEST OF FLORIDA, INC.

Current Principal Place of Business:

C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
LAND O LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 59-2912044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, CONNIE
6223 PARKWAY BLVD
LAND O LAKES, FL 34639 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

OFFICERS AND DIRECTORS:

Title: D
Name: EDWARDS, CONNIE
Address: 6223 PKWY BLVD
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: D
Name: EDWARDS, LEE
Address: 6223 PARKWAY BLVD
City-St-Zip: LAND O LAKES, FL 34639 US

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: CONNIE EDWARDS

PRES

03/23/2011

Electronic Signature of Signing Officer or Director

Date