2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# N02000009694

Entity Name: FLORIDA HEALTHY CHOICES COALITION, INC.

Current Principal Place of Business:

% VICKIE-JEAN MULLINS
10953 ARBOR VIEW BLVD.
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

% VICKIE-JEAN MULLINS
10953 ARBOR VIEW BLVD.
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 13-4232989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POBJECKY, A. RENEE
786 AVENUE C S.W.
WINTER HAVEN, FL 33880 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: P
Name: HUDDLESTON, DARLA
Address: 115 N. 13TH STREET
City-St-Zip: LEESBURG, FL 34748

Title: T
Name: MULLINS, VICKIE-JEAN
Address: 10953 ARBOR VIEW BLVD.
City-St-Zip: ORLANDO, FL 32825

Title: S
Name: LEWIS, LINDA
Address: 115 N. 13TH STREET
City-St-Zip: LEESBURG, FL 34748

Title: VP
Name: MULLARKEY, PAM
Address: 6817 SOUTHPOINT PARKWAY, SUITE 801
City-St-Zip: JACKSONVILLE, FL 32216

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICKIE-JEAN MULLINS T 04/26/2012
Electronic Signature of Signing Officer or Director Date