

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002394

FILED  
Mar 05, 2010  
Secretary of State

Entity Name: POSITIVE SPIN, INC.

**Current Principal Place of Business:**

5118 NORTH 56TH STREET  
242  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

5118 NORTH 56TH STREET  
242  
TAMPA, FL 33610

**New Mailing Address:**

PO BOX 310065  
TAMPA, FL 33680

FEI Number: 80-0167391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCOTT, HARRIET L.  
1002 W. LASALLE STREET  
TAMPA, FL 33607 US

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

SCOTT, HARRIET L.  
5118 N 56TH STREET  
SUITE 242  
TAMPA, FL 33610 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:

03/05/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVS  
Name: SCOTT, HARRIET L.  
Address: 5118 NORTH 56TH STREET, SUITE 242  
City-St-Zip: TAMPA, FL 33610 US

Title: T  
Name: PARLETT, MARY  
Address: 5118 N 56TH STREET, SUITE 242  
City-St-Zip: TAMPA, FL 33610 US

Title: D  
Name: MURPHY, LAURA  
Address: 5118 N 56TH STREET, SUITE 242  
City-St-Zip: TAMPA, FL 33610 US

Title: D  
Name: HAYES, BETTY J  
Address: 5118 N 56TH STREET, SUITE 242  
City-St-Zip: TAMPA, FL 33610 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HARRIET L. SCOTT

PVS

03/05/2010

Electronic Signature of Signing Officer or Director

Date