

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2011
Secretary of State**

DOCUMENT# N09000006201

Entity Name: TRUTH IN MEDICINE INCORPORATED

Current Principal Place of Business:

1521 ALTON ROAD #198
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1521 ALTON ROAD #198
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 27-0447271 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KEETON, LANA
1521 ALTON ROAD #198
MIAMI BEACH, FL 33139 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: PD
Name: KEETON, LANA C
Address: 1602 ALTON ROAD #423
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD
Name: SHULL, JAMES P
Address: 1803 EVERGREEN BOULEVARD
City-St-Zip: BROWNS MILLS, NJ 08015

Title: D
Name: VILLOCH, K
Address: 1307 DAYTONIA ROAD
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD
Name: SMITH, BARBARA B
Address: 2445 FLAMINGO PLACE
City-St-Zip: MIAMI BEACH, FL 33140

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: LANA C. KEETON

PD

04/30/2011

Electronic Signature of Signing Officer or Director

Date