

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2008
Secretary of State**

DOCUMENT# N47711

Entity Name: INSTITUTE OF METABOLIC RESEARCH, INC.

Current Principal Place of Business:

3229 HIGHWAY 17
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

3229 HIGHWAY 17
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOILEAU, JOHN
3229 HWY 17
GREEN COVE SPRINGS, FL 32043 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 () Delete
Name: SOILEAU, NINA
Address: 6191 W. SHORES RD.
City-St-Zip: ORANGE PARK, FL

Title: D () Delete
Name: SOILEAU, JOHN,
Address: 6191 W. SHORES RD
City-St-Zip: ORANGE PARK, FL

Title: D () Delete
Name: SOILEAU, JON
Address: 6191 W SHORES RD
City-St-Zip: ORANGE PARK, FL

Title: P () Delete
Name: SOILEAU, JOHN
Address: 6191 W. SHORES RD
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN SOILEAU

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date