

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50064

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** FOOD ADDICTS ANONYMOUS, INC.

**Current Principal Place of Business:**

529 NW PRIMA VISTA BLVD  
SUITE 301A  
PORT ST LUCIE, FL 34983 US

**New Principal Place of Business:**

**Current Mailing Address:**

529 NW PRIMA VISTA BLVD  
SUITE 301A  
PORT ST LUCIE, FL 34983 US

**New Mailing Address:**

**FEI Number:** 65-0348738      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HERLEHY, PATRICIA A AGENT  
972 SW KAPPA AVENUE  
PORT ST LUCIE, FL 34953 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: T  
Name: LEVY, DORENE TRUSTEE  
Address: 34 SWINDON COURT  
City-St-Zip: TOMS RIVER, NJ 08757 US

Title: T  
Name: ECKEL, PHYLLIS TREASUR  
Address: 31 CHESTERFIELD LANE  
City-St-Zip: TOMS RIVER, NJ 08757 US

Title: T  
Name: TAYLOR, AMIE SECRETA  
Address: 199 S OLD CREEK ROAD  
City-St-Zip: VERNON HILLS, IL 60061 US

Title: T  
Name: SCHOLL, CHUCK MODERAT  
Address: 333 NORTH AVENUE  
City-St-Zip: TALLMADGE, OH 44278 US

Title: T  
Name: TAYLOR, DIANE MODERAT  
Address: 16 CLEVELAND AVENUE  
City-St-Zip: EVERETT, MA 02149 US

Title: T  
Name: DAVID, JOSEPH TRUSTEE  
Address: 1920 S 5TH STREET, #207  
City-St-Zip: ALLENTOWN, PA 18103 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: DIANE TAYLOR

MDRT

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date