

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000058790

FILED
Apr 14, 2011
Secretary of State

Entity Name: COMPREHENSIVE WELLNESS SOLUTIONS INC.

Current Principal Place of Business:

5255 GREENBRIAR DRIVE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

5255 GREENBRIAR DRIVE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 26-2829189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVEY, WILLIAM G
5255 GREENBRIAR DRIVE
FORT MYERS, FL 33919 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, D
Name: DAVEY, WILLIAM G
Address: 5255 GREENBRIAR DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: TR
Name: DAVEY, WILLIAM G
Address: 5255 GREENBRIAR DRIVE
City-St-Zip: FORT MYERS, FL 33919

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

SIGNATURE: WILLIAM G. DAVEY

TR

04/14/2011

Electronic Signature of Signing Officer or Director

Date