

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098682

FILED
Apr 18, 2008
Secretary of State

Entity Name: RIGHT CHOICE DISTRIBUTOR, INC.

Current Principal Place of Business:

909 E SANDPIPER ST
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

380 SOUTH STATE ROAD 434
SUITE #1004-279
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 59-3535902 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COWAN, ROGER
909 E SANDPIPER STREET
APOPKA, FL 32712 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: COWAN, ROGER
Address: 5621 RIVER BIRCH CT.
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: COWAN, ROGER
Address: 909 EAST SANDPIPER STREET
City-St-Zip: APOPKA, FL 32712

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

SIGNATURE: ROGER COWAN

PRES

04/18/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date