

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000121219

FILED
Jan 08, 2010
Secretary of State

Entity Name: 5 SEASONS ACUPUNCTURE, INC.

Current Principal Place of Business:

1928 14TH AVE
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

1928 14TH AVE
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 26-1459977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNODGRESS, ALEXANDER
1305 24TH AVE
VERO BEACH, FL 32960 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: D/P
Name: SNODGRESS, ALEXANDER
Address: 1305 24TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: DVP
Name: SNODGRESS, SHANE
Address: 1150 49TH AVE
City-St-Zip: VERO BEACH, FL 32966

Title: T
Name: SNODGRESS, ADAM
Address: 1150 49TH AVE
City-St-Zip: VERO BEACH, FL 32966

Title: D/S
Name: SNODGRESS, LINDA
Address: 1150 49TH AVE
City-St-Zip: VERO BEACH, FL 32966

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: ALEXANDER SNODGRESS

P

01/08/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date