

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002224

Entity Name: CARPEVITA HEALTHY LIVING FOUNDATION, INC.

Current Principal Place of Business:

1000 CORPORATE DRIVE
SUITE 330
FORT LAUDERDALE, FL 33334

Current Mailing Address:

1000 CORPORATE DRIVE
SUITE 330
FORT LAUDERDALE, FL 33334 US

FEI Number: 46-1619938

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORESIGHT BUSINESS SERVICES, INC.
1000 CORPORATE DRIVE
SUITE 330
FORT LAUDERDALE, FL 33334 US

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

Officer/Director Detail :

Title P
Name DESIMONE, RICHARD
Address 1000 CORPORATE DRIVE
City-State-Zip: SUITE 330 FL 33334

Title VP
Name DESIMONE, DAWN
Address 1000 CORPORATE DRIVE. SUITE 330
City-State-Zip: FORT LAUDERDALE FL 33334

Title T
Name SHOEMAKER, WILLIAM
Address 1000 CORPORATE DRIVE, SUITE 330
City-State-Zip: FORT LAUDERDALE FL 33334

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: WILLIAM E. SHOEMAKER

DIRECTOR

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date