DOCUMENT# P94000089749

Entity Name: FOR THE HEALTH OF IT, INC.

## **Current Principal Place of Business:**

2217 WEST COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459

# **Current Mailing Address:**

94 OLYMPUS ROAD SANTA ROSA BEACH. FL 32459

# FEI Number: 59-3287992

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

BERRY, EDWARD 94 OLYMPUS ROAD SANTA ROSA BEACH, FL 32459 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

## **Officer/Director Detail :**

Title	DPT	Title	DVS
Name	BERRY, EDWARD	Name	MORGAN, RACHEL
Address	94 OLYMPUS ROAD	Address	94 OLYMPUS ROAD
City-State-Zip:	SANTA ROSA BEACH FL 32459	City-State-Zip:	SANTA ROSA BEACH FL 32459

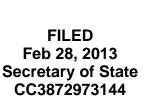
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD BERRY

PRESIDENT

02/28/2013

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: No

Date