

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004040

FILED
Apr 24, 2008
Secretary of State

Entity Name: A HEALTHIER YOU, INCORPORATED

Current Principal Place of Business:

4930 PARK BOULEVARD STE. 6
PINELLAS PARK, FL 33781

New Principal Place of Business:

121 STEEPLECHASE LANE
PALM HARBOR, FL 34684

Current Mailing Address:

4930 PARK BOULEVARD STE. 6
PINELLAS PARK, FL 33781

New Mailing Address:

121 STEEPLECHASE LANE
PALM HARBOR, FL 34684

FEI Number: 58-2670146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOSKE, LINDA H
4930 PARK BOULEVARD STE. 6
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

KOSKE, LINDA H
121 STEEPLECHASE LANE
PALM HARBOR, FL 34684 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: LINDA H. KOSKE

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOSKE, LINDA
Address: 4930 PARK BOULEVARD STE. 6
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOSKE, LINDA
Address: 121 STEEPLECHASE LANE
City-St-Zip: PALM HARBOR, FL 34684

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: LINDA H KOSKE

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date