

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G05799

FILED  
May 01, 2008  
Secretary of State

Entity Name: AMERICA'S NO. 1 LIFE AND HEALTH AGENCY, INC.

## Current Principal Place of Business:

2700 WEST CYPRESS CREEK RD  
SUITE A106  
FORT LAUDERDALE, FL 33309 US

## New Principal Place of Business:

## Current Mailing Address:

4833 COCONUT CREEK PKWY  
STE 305  
COCONUT CREEK, FL 33063 US

## New Mailing Address:

2700 WEST CYPRESS CREEK RD  
STE A106  
FORT LAUDERDALE, FL 33309 US

FEI Number: 59-2273712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATON, SCOTT  
2700 WEST CTPRESS CREEK RD, SUITE A106  
FORT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

WATON, SCOTT  
2700 WEST CYPRESS CREEK RD  
SUITE A106  
FORT LAUDERDALE, FL 33309 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: WATON, CRAIG,  
Address: 36 IXBRA WAY  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD ( ) Delete  
Name: WATON, SCOTT,  
Address: 1483 ESTWARY TRAIL  
City-St-Zip: DELRAY BEACH, FL 33483

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: WATON, CRAIG,  
Address: 36 IXORA WAY  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD (X) Change ( ) Addition  
Name: WATON, SCOTT,  
Address: 1483 ESTUARY TRAIL  
City-St-Zip: DELRAY BEACH, FL 33483

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: SCOTT WATON

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date