

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006574

FILED
Apr 28, 2005
Secretary of State

Entity Name: NUTRITION FOR THE BODY & SOUL, INC.

Current Principal Place of Business:

5864 NW 41ST WAY
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5864 NW 41ST WAY
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 65-1044984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAILEY-DOWLING, ANDREA
5864 NW 41ST WAY
COCONUT CREEK, FL 33073 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOWLING, JR., D.J.
Address: 5864 NW 41ST WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD () Delete
Name: BAILEY, LORETHA
Address: 1111 NW 55TH TERRACE
City-St-Zip: MIAMI, FL 33127

Title: STD () Delete
Name: ROBINSON, ANNETTE
Address: 1029 NW 55TH STREET
City-St-Zip: MIAMI, FL 33127

Title: EXD () Delete
Name: BAILEY-DOWLING, ANDREA
Address: 5864 NW 41ST WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: BAILEY, GERALD
Address: 2257 NW 100TH STREET
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: BRYANT, TERRY
Address: 2100 NW 171ST STREET
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA BAILEY-DOWLING

EXD

04/28/2005

Electronic Signature of Signing Officer or Director

Date