2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2010
Secretary of State

DOCUMENT# N01000000060

Entity Name: CYPRESS DIETETIC ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 12608
TALLAHASSEE, FL 323172608

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 12608
TALLAHASSEE, FL 323172608 US

New Mailing Address:

FEI Number: 65-0414541 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STAPELL, CHRISTINE
1982 CAPITAL CIRCLE NE
STE C
TALLAHASSEE, FL 32308 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: PRES
Name: FISH, LISA
Address: 8642 MARY MOSER LANE
City-St-Zip: LAKE WALES, FL 33889

Title: TREA
Name: ESHELMAN, JENNIFER
Address: 2125 SANDRA BEAUJARD BLVD #205
City-St-Zip: LAKELAND, FL 33813

Title: SEC
Name: DOWHAN, LINDSAY
Address: 200 AVE F NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: PE
Name: MCMANUS, SHANNON
Address: 5868 HOLLYHOCK DR
City-St-Zip: LAKELAND, FL 33813

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: JENNIFER ESHELMAN TREA 04/29/2010

Electronic Signature of Signing Officer or Director — Date