

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 24, 2012**  
**Secretary of State**

DOCUMENT# N01000006238

**Entity Name:** PRIMAL CONNECTION, INC.**Current Principal Place of Business:**9205 BRIDLE PATH  
SEBRING, FL 33875**New Principal Place of Business:****Current Mailing Address:**9205 BRIDLE PATH  
SEBRING, FL 33875**New Mailing Address:****FEI Number:** 65-1141270**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LEAVITT, FRED PRESIDE  
9205 BRIDLE PATH  
SEBRING, FL 33875 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: LEAVITT, FRED  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

Title: TREA  
Name: HILDEN, DONNALEE  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

Title: SEC  
Name: LEAVITT, GAIL  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

Title: VP  
Name: MIRIANI, DENISE  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

Title: VP  
Name: ROBERTSON, JIM  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

Title: VP  
Name: OMEARA, MARJORIE  
Address: 9205 BRIDLE PATH  
City-St-Zip: SEBRING, FL 33875

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: GAIL LEAVITT

SEC.

04/24/2012

Electronic Signature of Signing Officer or Director

Date