

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006615

FILED
Apr 28, 2011
Secretary of State

Entity Name: HEALING TOUCH BUDDIES, INC.

Current Principal Place of Business:

13901 US HIGHWAY 1
SUITE 2
JUNO BEACH, FL 33408

New Principal Place of Business:

13901 US HIGHWAY 1
SUITE 10
JUNO BEACH, FL 33408

Current Mailing Address:

13901 US HIGHWAY 1
SUITE 2
JUNO BEACH, FL 33408

New Mailing Address:

13901 US HIGHWAY 1
SUITE 10
JUNO BEACH, FL 33408

FEI Number: 34-2003940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, BETTY ANN
18841 N GOLDEN HAWK TRAIL
JUPITER, FL 33458 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: ED
Name: BAKER, BETTY ANN
Address: 18841 N GOLDEN HAWK TRAIL
City-St-Zip: JUPITER, FL 33458

Title: P
Name: WATSON, MARY ANN
Address: 4500 NW 83RD LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP
Name: CAIRA, JULIA
Address: 13110 SW 14TH PLACE
City-St-Zip: DAVIE, FL 33325

Title: T
Name: BRUNO, JANE
Address: 1082 VINTNER BLVD.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S
Name: DELPRETE, LINDA
Address: 20 STONEY DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: BETTY ANN BAKER

ED

04/28/2011

Electronic Signature of Signing Officer or Director

Date