2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N04000009320

Entity Name: NATURE'S CHAIN, INC.

Current Principal Place of Business:

9400 S. DADELAND BLVD
SUITE 600
MIAMI, FL 33156

New Principal Place of Business:

7600 RED ROAD
SUITE 206
SOUTH MIAMI, FL 331435408

Current Mailing Address:

P.O.BOX 141914
CORAL GABLES, FL 331141914

New Mailing Address:

FEI Number: 87-0733396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORGENSTERN, MELVIN C P.A.
9400 S. DADELAND BLVD
SUITE 600
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

RUSSELL C. FERGUSON, PA
7600 RED ROAD
SUITE 206
SOUTH MIAMI, FL 331435408 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: RUSSELL C FERGUSON 04/22/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MIDDELTHON, WILLIAM III
Address: POB 141914
City-St-Zip: MIAMI, FL 331141914

Title: D ( ) Delete
Name: FAJARDO, CLAUDIA
Address: 2730 FAIRWAYS DRIVE
City-St-Zip: HOMESTEAD, FL 33035

Title: D ( ) Delete
Name: PORTER, KEVIN
Address: 12947 S.W. 67TH LANE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MIDDELTHON, WILLIAM R III
Address: P. O. BOX 141914
City-St-Zip: CORAL GABLES, FL 331141914

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM R MIDDELTHON, III D 04/22/2009
Electronic Signature of Signing Officer or Director Date