

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004362

FILED
Aug 08, 2006
Secretary of State

Entity Name: NUTRITION, FITNESS FOR LIFE, INC.

Current Principal Place of Business:

8560 HEATHER RUN DR. S
JACKSONVILLE, FL 32256

New Principal Place of Business:

8650 HEATHER RUN DR. S
JACKSONVILLE, FL 32256

Current Mailing Address:

8560 HEATHER RUN DR. S
JACKSONVILLE, FL 32256

New Mailing Address:

8650 HEATHER RUN DR. S
JACKSONVILLE, FL 32256

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOWELL, TRISHA
8560 HEATHER RUN DR. S
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

HOWELL, TRISHA
8650 HEATHER RUN DR. S
JACKSONVILLE, FL 32256 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: _____

08/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HOWELL, TRISHA
Address: 8560 HEATHER RUN DR. S.
City-St-Zip: JACKSONVILLE, FL 32256

Title: VSD () Delete
Name: WILSON, LAUREL
Address: 1739 SUNSET DR
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: HOWELL, GEORGE
Address: 8560 HEATHER RUN DR. S
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: HOWELL, TRISHA
Address: 8650 HEATHER RUN DR. S.
City-St-Zip: JACKSONVILLE, FL 32256

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

Title: D (X) Change () Addition
Name: HOWELL, GEORGE
Address: 8650 HEATHER RUN DR. S
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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: TRISHA HOWELL

PTD

08/08/2006

Electronic Signature of Signing Officer or Director

Date