2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2011
Secretary of State

DOCUMENT# N05000008735

Entity Name: XTREME SOULUTIONS, INC.

Current Principal Place of Business:

101 NE 16TH AVENUE
OCALA, FL 34470

New Principal Place of Business:

5100 WEST HWY 40
STE 1000
OCALA, FL 34482

Current Mailing Address:

PO BOX 5487
OCALA, FL 34478

New Mailing Address:

FEI Number: 30-0293324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITT, BLAINE
10051 NW 215TH LANE ROAD
MICANOPY, FL 32667 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: DPT
Name: WHITT, BLAINE
Address: 10051 NW 215 LANE RD
City-St-Zip: MICANOPY, FL 32667

Title: DS
Name: BLACKBURN, TAMMY
Address: 2041 NW 146TH PLACE
City-St-Zip: CITRA, FL 32113

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: BLAINE WHITT PRES 02/23/2011
Electronic Signature of Signing Officer or Director Date