

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005484

FILED  
Mar 25, 2007  
Secretary of State

**Entity Name:** NURTURED TO BE LIFE'S BEST INCORPORATED

**Current Principal Place of Business:**

1220 ASTURIA WAY SOUTH  
ST. PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

1220 ASTURIA WAY SOUTH  
ST. PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** 86-1158100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRYANT, CORLIS  
1220 ASTURIA WAY SOUTH  
ST. PETERSBURG, FL 33705 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: D ( ) Delete  
Name: BRYANT, CORLIS  
Address: 1220 ASTURIA WAY SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: DAVIS, ANTONIO  
Address: 1500 28TH AVENUE SO.  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: BAILEY, SANDRA  
Address: 837 54TH AVENUE SO.  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: BUTLER, LADONNA  
Address: 2370 10TH AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: CURRY, LIZ  
Address: 5560 10TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: SWAIN, DENNISE  
Address: 711 40TH AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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 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: CORLIS BRYANT

D

03/25/2007

Electronic Signature of Signing Officer or Director

Date