2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# N07000009753

Entity Name: HEALTH EDUCATION AND PROMOTION COUNCIL, INC.

Current Principal Place of Business:

1291 N US HIGHWAY 1, BUILDING 3, UNIT 7
ORMOND BEACH, FL 32174

New Principal Place of Business:

1291 N US HIGHWAY 1, STE 7
ORMOND BEACH, FL 32174

Current Mailing Address:

139 ROBERTA RD
ORMOND BEACH, FL 32176

New Mailing Address:

1291 N US HIGHWAY 1, STE 7
ORMOND BEACH, FL 32174

FEI Number: 26-1193630 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEBER, JANIS
139 ROBERTA RD
ORMOND BEACH, FL 32176 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: PCEO ( ) Delete
Name: WEBER, JANIS
Address: 139 ROBERTA RD
City-St-Zip: ORMOND BEACH, FL 32176

Title: D ( ) Delete
Name: MYRICK, SALLY
Address: 1736 ASTURIAS ST
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: ST ( ) Delete
Name: WEBER, ROGER
Address: 139 ROBERTA RD
City-St-Zip: ORMOND BEACH, FL 32176

Title: CFO ( ) Delete
Name: WEBER, ROGER
Address: 139 ROBERTA RD
City-St-Zip: ORMOND BEACH, FL 32176

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:

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: JANIS WEBER PCEO 03/29/2009
Electronic Signature of Signing Officer or Director — Date