2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001317

FILED Mar 19, 2010 Secretary of State

Entity Name: PROS AND PARENTS TACKLE CHILDHOOD OBESITY, INC.

Current Principal Place of Business: New Principal Place of Business:

7961 MEGAN HAMMOCK WAY SARASOTA, FL 342408244

Current Mailing Address: New Mailing Address:

7961 MEGAN HAMMOCK WAY SARASOTA, FL 342408244

FEI Number: 26-1952568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HARRAWAY, CHARLEY E JR 7961 MEGAN HAMMOCK WAY SARASOTA, FL 342408244 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: HARRAWAY, CHARLEY E JR Address: 7961 MEGAN HAMMOCK WAY City-St-Zip: SARASOTA, FL 342408244

Title: D

 Name:
 HARRAWAY, GAIL I JR

 Address:
 7961 MEGAN HAMMOCK WAY

 City-St-Zip:
 SARASOTA, FL 342408244

Title:

Name: WRIGHT, MARGARET E Address: 4673 PINE GREEN TRAIL City-St-Zip: SARASOTA, FL 34241

Title:

 Name:
 SCHMIDT, WAYNE R

 Address:
 4648 TUSCANA DRIVE

 City-St-Zip:
 SARASOTA, FL 34241

Title:

Name: LAURIA, EMANUEL

Address: 3762 EAGLE HAMMOCK DRIVE

City-St-Zip: SARASOTA, FL 34240

Title: D

Name: GOVEIA, DERRICK F

Address: 3764 EAGLE HAMMOCK DRIVE City-St-Zip: SARASOTA, FL 34240

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: TREASURER--EMANUEL LAURIA TREA 03/19/2010