2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000003694

Entity Name: THE SELF MOVEMENT, INC.

FILED Apr 22, 2012 Secretary of State

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

4480 DEERWOOD LAKES PARKWAY 9035 HAMPTON LANDING DRIVE EAST

#524 JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32216 US

Current Mailing Address: New Mailing Address:

4480 DEERWOOD LAKES PARKWAY 9035 HAMPTON LANDING DRIVE EAST

#524 JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32216 US

FEI Number: 27-2342873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BADE, WILLIAM S

4480 DEERWOOD LAKES PARKWAY

9035 HAMPTON LANDING DRIVE EAST

524 JACKSONVILLE, FL 32216 US

JACKSONVILLE, FL 32216 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: WILLIAM S BADE 04/22/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: BADE, WILLIAM S

Address: 9035 HAMPTON LANDING DRIVE EAST

City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VPD

Name: CONNELL, JENNIFER
Address: 2340 COUNTRY SIDE DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: BD

Name: BERGIN, KYLE S

Address: 1555 RIVERTRACE DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: BD

Name: GIBSON, GARRICK L Address: 3850 MARNIE PLACE

City-St-Zip: JACKSONVILLE, FL 32223 US

Title: BD

Name: MORGAN, MICHAEL

Address: 3876 SUMMER GROVE WAY N City-St-Zip: JACKSONVILLE, FL 32257 US

Title: BD

 Name:
 TERRY, STANDRALYN C

 Address:
 7948 RENAULT DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32244 US

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: WILLIAM S BADE PD 04/22/2012