

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004950

FILED
Feb 21, 2011
Secretary of State

Entity Name: CENTER FOR HEALTH-WEALTH-SELF EQUALITY, INC.

Current Principal Place of Business:

1526 UNIVERSITY BLVD. W.
423
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

1526 UNIVERSITY BLVD. W.
423
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 27-2611314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEERTS, SALLY E
5323 STETSON ROAD
JACKSONVILLE, FL 32207 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: VP
Name: AUGSPURGER, ROBERT L
Address: 2017 PALMETTO POINT
City-St-Zip: PONTE VEDRA, FL 32082

Title: P
Name: WEERTS, SALLY E
Address: 5323 STETSON ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP
Name: LANDRY, KAREN
Address: 5196-A NORWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

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: SALLY E. WEERTS

PRES

02/21/2011

Electronic Signature of Signing Officer or Director

Date