

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010819

FILED  
Feb 27, 2012  
Secretary of State

**Entity Name:** PERSONAL BEST INITIATIVES INC.

**Current Principal Place of Business:**

4959 RUSTIC OAKS CIRCLE  
NAPLES, FL 34105

**New Principal Place of Business:**

4290 LONGSHORE WAY S  
NAPLES, FL 34119

**Current Mailing Address:**

4959 RUSTIC OAKS CIRCLE  
NAPLES, FL 34105

**New Mailing Address:**

4290 LONGSHORE WAY S  
NAPLES, FL 34119

**FEI Number:** 20-3969655

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAWTHORNE, ANEKKA E I  
4959 RUSTIC OAKS CIRCLE  
NAPLES, FL 34105 US

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

HAWTHORNE, ANEKKA E I  
4290 LONGSHORE WAY S  
NAPLES, FL 34119 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:

02/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HAWTHORNE, ANEKKA E I  
Address: 4290 LONGSHORE WAY S  
City-St-Zip: NAPLES, FL 34119

Title: DT  
Name: MAXNER, JUSTIN  
Address: 4959 RUSTIC OAKS CIRCLE  
City-St-Zip: NAPLES, FL 34105

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: ANEKKA E. I. HAWTHORNE

DP

02/27/2012

Electronic Signature of Signing Officer or Director

Date