## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11000004607

Apr 24, 2012 Secretary of State

Date

Entity Name: MOORINGS PARK HEALTHY LIVING, INCORPORATED

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

120 MOORINGS PARK DR NAPLES, FL 34105

**Current Mailing Address: New Mailing Address:** 

120 MOORINGS PARK DR NAPLES, FL 34105

FEI Number: 45-2443047 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:

CLASP, INC LAVENDER, DANIEL J 3001 TÁMIAMI TRAIL NORTH SUITE 300 120 MOORINGS PARK DR NAPLES, FL 34103 NAPLES, FL 34105

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: DANIEL J LAVENDER

04/24/2012 Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

BUTTS, JACK L Name:

Address: 120 MOORINGS PARK DR City-St-Zip: NAPLES, FL 34105

Title:

Name: HEINEMAN, DENISE DR Address: 120 MOORINGS PARK DR City-St-Zip: NAPLES, FL 34105

Title:

YANNI, FRED Name:

120 MOORINGS PARK DR Address: City-St-Zip: NAPLES, FL 34105

Title: СН

Name: LITTLE, JOHN R

120 MOORINGS PARK DR Address: City-St-Zip: NAPLES, FL 34105

Title: **PCEO** 

LAVENDER, DANIEL J Name: 120 MOORINGS PARK DR Address: City-St-Zip: NAPLES, FL 34105

Title:

MITCHELL, PAUL DR Name: Address: 120 MOORINGS PARK DR NAPLES, FL 34105 City-St-Zip:

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: DANIEL J LAVENDER **PCEO** 04/24/2012