

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010483

FILED  
Jun 02, 2012  
Secretary of State

**Entity Name:** HEALTHY FOOD HEALTHY LIVING, INC.

**Current Principal Place of Business:**

1124 BROADWAY  
SUITE "R"  
RIVIERA BEACH, FL 33404 US

**New Principal Place of Business:**

1124 BROADWAY  
SUITE  
RIVIERA BEACH, FL 33404 US

**Current Mailing Address:**

1124 BROADWAY  
SUITE  
RIVIERA BEACH, FL 33404 US

**New Mailing Address:**

**FEI Number:** 90-0773599      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

JENNINGS, JANICE L ESQUIRE  
777 SOUTH FLAGLER DRIVE  
WEST TOWER SUITE 800  
WEST PALM BEACH, FL 33401 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:** PRES  
**Name:** WATSON, WILLYE  
**Address:** 1124 BROADWAY  
**City-St-Zip:** RIVIERA BECH, FL 33404 US

**Title:** SEC  
**Name:** WINKELSPETHP, MARY E  
**Address:** 415 36TH STREET  
**City-St-Zip:** WEST PALM BEACH, FL 33407 US

**Title:** TRES  
**Name:** WATSON, WILLYE  
**Address:** 1124 BROADWAY  
**City-St-Zip:** RIVIERA BEACH, FL 33404 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: WILLYE WATSON

PRES

06/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date