

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50064

FILED
Mar 25, 2009
Secretary of State

Entity Name: FOOD ADDICTS ANONYMOUS, INC.

Current Principal Place of Business:

4623 FOREST HILL BLVD.
SUITE 109-4
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

4623 FOREST HILL BLVD.
SUITE 109-4
WEST PALM BEACH, FL 33415 US

New Mailing Address:

FEI Number: 65-0348738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLOSI, JR, LINDA M AGENT
10718 ANDERSON LANE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

CLOSI, JR, LINDA M AGENT
1197 CHORUS WAY
ROYAL PALM BEACH, FL 33411 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:

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: ARMS, LINDA MODERAT
Address: 4618 ST. ELMO STREET
City-St-Zip: MEMPHIS, TN 38128 US

Title: T () Delete
Name: HORISK, PEGGY SECRETA
Address: 706 GYPSY AVENUE
City-St-Zip: STAUNTON, VA 24401 US

Title: T () Delete
Name: ATTHANASOFF, KATHY TREASUR
Address: 617 MALLARD ROAD
City-St-Zip: ELYRIA, OH 44035 US

Title: T () Delete
Name: FILKINS, DEANNA AGENT
Address: 231 N W 52ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ARMS, LINDA SECRETA
Address: 4618 ST. ELMO STREET
City-St-Zip: MEMPHIS, TN 38128 US

Title: T (X) Change () Addition
Name: BINCK, CATHERINE MODERAT
Address: 1737 YORK AVENUE #1B
City-St-Zip: NEW YORK, NY 10128 US

Title: T (X) Change () Addition
Name: ELSBREE, VALERIE TREASUR
Address: 4721 N.E. 5TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LINDA M. CLOSI, JR.

EA

03/25/2009

Electronic Signature of Signing Officer or Director

Date