

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003485

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: HEALTHY PALM BEACHES, INC.

## Current Principal Place of Business:

324 DATURA ST.  
SUITE 401  
WEST PALM BEACH, FL 33401

## New Principal Place of Business:

2601 10TH AVENUE  
SUITE 100  
PALM SPRINGS, FL 33461

## Current Mailing Address:

324 DATURA ST.  
SUITE 401  
WEST PALM BEACH, FL 33401

## New Mailing Address:

2601 10TH AVENUE  
SUITE 100  
PALM SPRINGS, FL 33461

FEI Number: 65-0550288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARRAN, NICHOLE M  
324 DATURA ST.  
SUITE 401  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

CARRAN, NICHOLE M  
2601 10TH AVENUE  
SUITE 100  
PALM SPRINGS, FL 33461 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:

01/05/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: FRANK, BENJAMIN  
Address: 2601 10TH AVE. STE 100  
City-St-Zip: PALM SPRINGS, FL 33461

Title: CFO  
Name: VATH, HOLLY  
Address: 2601 10TH AVE STE 100  
City-St-Zip: PALM SPRINGS, FL 33461

Title: CEO  
Name: WIEWORA, RONALD J MD  
Address: 2601 10TH AVE STE 100  
City-St-Zip: PALM SPRINGS, FL 33461

Title: D  
Name: ROBERTS, CAROL A  
Address: 324 DATURA ST #401  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: ABRUZZO, JOSEPH  
Address: 324 DATURA ST#401  
City-St-Zip: BOCA RATON, FL 33433

Title: D  
Name: ALONSO, ALINA  
Address: 800 CLEMATIS STREET  
City-St-Zip: WEST PALM BEACH, FL 33402

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: HOLLY VATH

CFO

01/05/2012

Electronic Signature of Signing Officer or Director

Date