

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 14, 2008
Secretary of State

DOCUMENT# N95000003987

Entity Name: PARTNERS FOR COMMUNITY WELLNESS, INC.**Current Principal Place of Business:**3111 DR. M.L. KING JR. BLVD.
SUITE 100
TAMPA, FL 33607 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 702
PINELLAS PARK, FL 33780 US**New Mailing Address:****FEI Number:** 59-3386955**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MELBY, ROBERT M CPA
424 CENTRAL AVE
SUITE 1000
ST. PETERSBURG, FL 33711 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:** ED () Delete
Name: SHORT, GENIE S EX DIR
Address: 6843 CIRCLE CREEK DR
City-St-Zip: PINELLAS PARK, FL 33781 US**Title:** T () Delete
Name: POSTON, DENNIS CPA
Address: 500 HARBOUR PLACE - P.O. BOX 702
City-St-Zip: PINELLAS PARK, FL 33780 US**Title:** S () Delete
Name: DURGAN, WENDY SEC
Address: 3111 DR. M.L. KING JR BLVD #100
City-St-Zip: TAMPA, FL 33607 US**Title:** VC () Delete
Name: VITUCCI, JUDI DIR
Address: 2735 WHITNEY ROAD
City-St-Zip: CLEARWATER, FL 33760 US**Title:** D () Delete
Name: CANTOR, JESSICA DIR
Address: 3111 DR. M.L. KING JR. BLVD #100
City-St-Zip: TAMPA, FL 33607 US**Title:** C () Delete
Name: SANTINI, JOSEPH
Address: 3111 DR. M.L. KING JR. BLVD #100
City-St-Zip: TAMPA, FL 33607 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VC (X) Change () Addition
Name: MCLEOD, JANICE DIR
Address: 3111 W. DR. M.L. KING BLVD. SUITE 100
City-St-Zip: TAMPA, FL 33607 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** C (X) Change () Addition
Name: PINTER, DENISE M
Address: 3111 DR. M.L. KING JR. BLVD #100
City-St-Zip: TAMPA, FL 33607 US

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: GENIE S. SHORT

ED

10/14/2008

Electronic Signature of Signing Officer or Director_____
Date