2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 11, 2007 8:00 am Secretary of State DOCUMENT # N97000003112 04-11-2007 90026 003 ****61.25 MIND, BODY & SPIRIT, INC. Principal Place of Business Mailing Address 2608 CLINE STREET 101 EAST COLLEGE AVENUE TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32301 2. Principal Place of Business - No P.O. Box # 3. Mailing Address clo Fred Harris Suite, Apt. #, etc. Suite, Apt. #, etc. 04082007 Chg-NP CR2E037 (12/06) 01 East College Ave Applied For City & State 4. FEI Number 59-3449794 allahassec, Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 32301 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARRIS, FRED F JR. 101 EAST COLLEGE AVENUE Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE, FL 32301 City Zip Code FL 8. 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filling Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE ☐ Delete Channe ☐ Addition LUKE, HELEN NAME NAME STREET ADDRESS 1813 HIGH ROAD STREET ADDRESS TALLAHASSEE, FL 32303 CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete TITLE Change ■ Addition NAME MURRAY, STEFFANI NAME 1400 WOODGATE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32308 CITY-ST-ZIP PD TITLE ☐ Delete TITLE TR Channe ☐ Addition Fred Harric HARRIS, FRED NAME 1050 Solomon Dairy Rel NAME STREET ADDRESS 2608 CLINE STREET STREET ADDRESS 〉 Quincy, FL 32352 CITY-ST-ZIP TALLAHASSEE, FL 32308 CITY-ST-ZIP TITLE Delete TITI F ☐ Change **Addition** Linda Mac Donald TENNEY, MEREDITH NAME NAME 1801 Heinrich St. #10 STREET ADDRESS PO BOX 7 STREET ADDRESS CITY-ST-ZIP ACWORTH, NH 03601 CJTY-ST-ZIP Pensacola, FL 32507 TITLE Delete TITLE ☐ Change ☐ Addition LANGSTON, JUDY NAME 1019 LONGSTREET DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP TITLE DT ☐ Defete TITLE Change ■ Addition SUTTON, PAULA NAME NAME 2028 CYNTHIA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32302 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered. Paula Sutton