2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N97000003112

Entity Name: MIND, BODY & SPIRIT, INC.

Current Principal Place of Business:

101 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

C/O FRED HARRIS
101 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3449794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, FRED F JR.
101 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301 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:	DS	( ) Delete
Name:	LUKE, HELEN	
Address:	1813 HIGH RD	
City-St-Zip:	TALLAHASSEE, FL 32303	
Title:	D	( ) Delete
Name:	MURRAY, STEFFANI	
Address:	1400 WOODGATE WAY	
City-St-Zip:	TALLAHASSEE, FL 32308	
Title:	PD	( ) Delete
Name:	HARRIS, FRED	
Address:	1050 SOLOMON DAIRY RD	
City-St-Zip:	QUINCY, FL 32352	
Title:	D	( ) Delete
Name:	MACDONALD, LINDA	
Address:	1801 HEINRICH ST #10	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	DT	( ) Delete
Name:	SUTTON, PAULA	
Address:	2028 CYNTHIA DR	
City-St-Zip:	TALLAHASSEE, FL 32302	
Title:	D	( ) Delete
Name:	LANGSTON, JUDY	
Address:	1019 LONGSTREET DR	
City-St-Zip:	TALLAHASSEE, FL 32311	

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:	D	(X) Change ( ) Addition
Name:	MACDONALD, LINDA	
Address:	28 ARLINGTON ST., #3	
City-St-Zip:	AMESBURY, MA 01913 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: PAULA SUTTON TR. 04/17/2009

Electronic Signature of Signing Officer or Director — Date