

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031152

Entity Name: CBHEALTHVENTURES, INC.

FILED
Apr 21, 2011
Secretary of State

Current Principal Place of Business:

8172 GREEN STREET
LAUREL HILL, FL 32567

New Principal Place of Business:

108 WAGNER ST
BONIFAY, FL 32425

Current Mailing Address:

P.O. BOX 141
LAUREL HILL, FL 32567

New Mailing Address:

FEI Number: 59-3641050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOGWOOD INN OF BONIFAY
8172 GREEN STREET
LAUREL HILL, FL 32567 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: D
Name: SMITH, LAWTON B
Address: 8172 GREEN STREET
City-St-Zip: LAUREL HILL, FL 32567

Title: D
Name: SMITH, KAJSA B
Address: 8172 GREEN ST
City-St-Zip: LAUREL HILL, FL 32567 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAWTON B. SMITH

D

04/21/2011

Electronic Signature of Signing Officer or Director

Date