

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004231

Entity Name: VITAMIN CIRCLE, INC.

FILED  
Apr 21, 2005  
Secretary of State

## Current Principal Place of Business:

1940 HARRISON ST  
STE 201C  
HOLLYWOOD, FL 33020

## Current Mailing Address:

1940 HARRISON ST  
STE 201C  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

400 17TH ST NW  
1243  
ATLANTA, GA 30363

## New Mailing Address:

400 17TH ST NW  
1243  
ATLANTA, GA 30363

FEI Number: 65-1068554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLORAN, CHRISTOPHER J  
1940 HARRISON ST  
STE 201C  
HOLLYWOOD, FL 33020 US

## Name and Address of New Registered Agent:

HOLLORAN, EDWARD L III  
625 N FLAGLER DR  
STE 502  
WEST PALM BEACH, FL 33401 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: EDWARD L HOLLORAN, III

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: HOLLORAN, CHRISTOPHER J  
Address: 330 VIRGINIA ST APT 10  
City-St-Zip: HOLLYWOOD, FL 33019

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: HOLLORAN, CHRISTOPHER J  
Address: 1731 FERNLEAF CIR NW  
City-St-Zip: ATLANTA, GA 30318

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J HOLLORAN

PSTD

04/21/2005

Electronic Signature of Signing Officer or Director

Date