2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012408

Entity Name: FLORIDA INSTITUTE OF NATURAL HEALTH, INC.

FILED Apr 04, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

528 SOUTH PINELLAS AVENUE 1244 SOUTH PINELLAS AVENUE TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689

Current Mailing Address: New Mailing Address:

P.O.BOX 2423 1244 S. PINELLAS AVE TARPON SPRINGS, FL 34688 TARPON SPRINGS, FL 34689

FEI Number: 59-3699372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATTEN-LANGE, ANNA M
528 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 US
BATTEN-LANGE, ANNA M
1244 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 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: 04/04/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DF

Name: BATTEN-LANGE, ANNA M
Address: 1244 SOUTH PINELLAS AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

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: ANNA BATTEN-LANGE P 04/04/2011