

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082425

FILED
May 01, 2010
Secretary of State

Entity Name: CENTER FOR WELLNESS AND DISEASE PREVENTION, INC.

Current Principal Place of Business:

650 WYMORE RD,
STE 202
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

650 WYMORE RD,
STE 202
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3744463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, GIDEON G DR.
650 WYMORE RD
STE 202
WINTER PARK, FL 32789 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: LEWIS, GIDEON G DR
Address: 1564 FOXDEN RD
City-St-Zip: APOPKA, FL 32712 US

Title: VP
Name: DAVIS, CHANDRA N MRS
Address: 1280 W. PEACHTREE ST #806
City-St-Zip: ATLANTA, GA 30309 US

Title: T
Name: DAVIS, JEFFREY M MR
Address: 1280 W. PEACHTREE ST #806
City-St-Zip: ATLANTA, GA 30309 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: JEFFREY M DAVIS

T

05/01/2010

Electronic Signature of Signing Officer or Director

Date