

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117450

Entity Name: WHOLEFOOD FARMACY CORP.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

117 EAST MAIN ST.
ROGERSVILLE, TN 37857

New Principal Place of Business:

Current Mailing Address:

117 E. MAIN ST.
ROGERSVILLE, TN 37857

New Mailing Address:

117 EAST MAIN ST.
ROGERSVILLE, TN 37857

FEI Number: 52-2366262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE - STE. 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TILTON, STEVEN L
Address: 405 DOGWOOD CT
City-St-Zip: ROGERSVILLE, TN 37857

Title: D () Delete
Name: BOWEN, MARK
Address: 608 WEST HILLS DRIVE
City-St-Zip: ROGERSVILLE, TN 37857

Title: D () Delete
Name: ASLANIAN, JOHN
Address: 22 JEAN DRIVE
City-St-Zip: ENGLEWOOD CLIFFS, NJ 07632

Title: D () Delete
Name: RICORD, RORY
Address: 11234 TALL PINES WAY
City-St-Zip: SANDY, UT 84092

Title: D () Delete
Name: PERRY, WILLIAM
Address: 638 BIRD CREEK ROAD
City-St-Zip: SNEEDVILLE, TN 37869

Title: D (X) Delete
Name: BAKER, DAVID
Address: 5420 BEACH DRIVE
City-St-Zip: ST LEONARD, MD 20685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRAND, DAVID B
Address: 117 E MAIN STREET
City-St-Zip: ROGERSVILLE, TN 37857

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

SIGNATURE: STEVEN L TILTON

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date