

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000025243

FILED
Mar 24, 2006
Secretary of State

Entity Name: NUTRITION & LIFESTYLE COUNSELING, INC.

Current Principal Place of Business:

723 ST. JUDES DRIVE SOUTH
2
LONGBOAT KEY, FL 34228

New Principal Place of Business:

3689 SOLITAIRE DRIVE
SALT LAKE CITY, UT 84106

Current Mailing Address:

723 ST. JUDES DRIVE SOUTH
2
LONGBOAT KEY, FL 34228

New Mailing Address:

7648 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34243

FEI Number: 01-0627020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNORI, ALTEA M
723 ST. JUDES DRIVE SOUTH
2
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

WOMELDORPH, HOWARD R CPA
7648 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34243 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: HOWARD R. WOMELDORPH, CPA

03/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRUNORI, ALTEA M
Address: 723 ST. JUDES DRIVE SOUTH, # 2
City-St-Zip: LONGBOAT KEY, FL 34228

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRUNORI, ALTEA M
Address: 3689 SOLITAIRE DRIVE
City-St-Zip: SALT LAKE CITY, UT 84106

Title: VP () Change (X) Addition
Name: WHITMAN, MERRITT E II
Address: 3689 SOLITAIRE DRIVE
City-St-Zip: SALT LAKE CITY, UT 84106

I hereby certify that the information supplied with this filing does not qualify for the 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: ALTEA M. BRUNORI

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03/24/2006

Electronic Signature of Signing Officer or Director

Date