2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2012
Secretary of State

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Entity Name: JADE PALMS HEALTH AND HEALING CENTER, P.A.

Current Principal Place of Business:

1413 S. PATRICK DRIVE
SUITE 4
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

1413 S. PATRICK DRIVE
SUITE 4
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 01-0643959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NAFE, JENNIFER LYN
175 SAND DOLLAR RD
INDIALANTIC, FL 32903 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

OFFICERS AND DIRECTORS:

Title: PD
Name: NAFE, JENNIFER LYN
Address: 175 SAND DOLLAR RD
City-St-Zip: INDIALANTIC, FL 32903

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: JENNIFER LYN NAFE PD 03/23/2012
Electronic Signature of Signing Officer or Director Date