2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P02000035837

Entity Name: NEW AGE NUTRITION, INC.

Current Principal Place of Business:

PO BOX 120699
CLERMONT, FL 34712

New Principal Place of Business:

355 BRIMMING LAKE RD.
MINNEOLA, FL 34715

Current Mailing Address:

PO BOX 120699
CLERMONT, FL 34712

New Mailing Address:

355 BRIMMING LAKE RD.
MINNEOLA, FL 34715

FEI Number: 01-0711130 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JORDAN II,, EDWARD P ESQUIRE
13543 E HWY 50
CLERMONT, FL 34711 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: GRAYBUSH, GARY J
Address: PO BOX 120699
City-St-Zip: CLERMONT, FL 34712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GRAYBUSH, GARY J
Address: 355 BRIMMING LAKE RD.
City-St-Zip: MINNEOLA, FL 34715

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: GARY J. GRAYBUSH PRES 04/13/2009

Electronic Signature of Signing Officer or Director Date