

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050952

FILED
Apr 29, 2011
Secretary of State

Entity Name: WHOLISTIC MEDICINE CLINIC, INC.

Current Principal Place of Business:

1905 S 25TH STREET
SUITE 100
FORT PIERCE, FL 349474739 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 881591
PORT SAINT LUCIE, FL 349881591

New Mailing Address:

FEI Number: 81-0563790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYE, REBECCA A
1905 S 25TH STREET
SUITE 100
FORT PIERCE, FL 349474739 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: MGRM
Name: TYE, REBECCA A
Address: 1905 S 25TH STREET SUITE 100
City-St-Zip: FORT PIERCE, FL 349474739 US

Title: D
Name: TYE, WILLIAM G III
Address: 1905 S 25TH STREET SUITE 100
City-St-Zip: FORT PIERCE, FL 349474739

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: REBECCA A TYE

MM

04/29/2011

Electronic Signature of Signing Officer or Director

Date