## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051227

Entity Name: WOMEN'S WEIGHT CONTROL AND WELLNESS CENTER, INC

FILED Mar 31, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

24 E NINE MILE ROAD
PENSACOLA, FL 32534
24 EAST NINE MILE ROAD
PENSACOLA, FL 32514

Current Mailing Address: New Mailing Address:

4043 ELMCREST DR 701 N. 18TH AVENUE PENSACOLA, FL 32504 PENSACOLA, FL 32501

FEI Number: 56-2286322 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MESSER, ELIZABETH N
4043 ELMCREST DR
701 N. 18TH AVENUE
PENSACOLA, FL 32504 US
PENSACOLA, FL 32501 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: E. NICOLE PIRES 03/31/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 MESSER, NICOLE E
 Name:
 PIRES, NICOLE E

 Address:
 4043 ELM CREST DR.
 Address:
 701 N. 18TH AVENUE

 City-St-Zip:
 PENSACOLA, FL 32504
 City-St-Zip:
 PENSACOLA, FL 32501

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: E. NICOLE PIRES P 03/31/2006