## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000093822

FILED Feb 21, 2011 Secretary of State

Date

Entity Name: SURE TOUCH CENTER FOR THE HEALING ARTS, INC.

Electronic Signature of Registered Agent

**New Principal Place of Business: Current Principal Place of Business:** 5600 TAMIAMI TR. NORTH SUITE 13 NAPLES FL 34108 **Current Mailing Address: New Mailing Address:** 8315 BIG ACORN CIR. **UNIT 904** NAPLES, FL 34119 US FEI Number: 55-0800351 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OEHSER, WILLIAM C 8315 BIG ACORN CIR. #904 NAPLES, FL 34119 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:

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 OEHSER, WILLIAM C

 Address:
 8315 BIG ACORN CIR. - #904

 City-St-Zip:
 NAPLES, FL 34119 US

Title: VP

 Name:
 OEHSER, MARIANNE T

 Address:
 8315 BIG ACORN CIR. - #904

 City-St-Zip:
 NAPLES, FL 34119 US

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: WILLIAM C. OEHSER PRES 02/21/2011