

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000102146

FILED
Dec 17, 2006
Secretary of State**Entity Name:** THE MESSAGE THERAPY SOURCE, INC.**Current Principal Place of Business:**2553 SR 60 E.
VALRICO, FL 33594**New Principal Place of Business:****Current Mailing Address:**10143 SOMERSBY DR.
RIVERVIEW, FL 33569**New Mailing Address:**2208 GLEN MIST DRIVE
VALRICO, FL 33594**FEI Number:** 55-0796702**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**DRIGGERS, CHERYL L
10143 SOMERSBY DR.
RIVERVIEW, FL 33569 US**Name and Address of New Registered Agent:**KRUPA, LINDA A
2208 GLEN MIST DRIVE
VALRICO, FL 33594 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: LINDA A. KRUPA

12/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: DRIGGERS, CHERYL L
Address: 10143 SOMERSBY DR.
City-St-Zip: RIVERVIEW, FL 33569**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: KRUPA, LINDA A
Address: 2208 GLEN MIST DRIVE
City-St-Zip: VALRICO, FL 33594

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: LINDA A. KRUPA

PD

12/17/2006

Electronic Signature of Signing Officer or Director

Date