2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000103863

1. Entity Name
RESULTS PERFORMANCE CONSULTING, INC.

FILED
10 NOV -1 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10122010 Chg-P CR2E034 (11/08)

Principal Place of Business	Mailing Address
1200 N. FEDERAL HIGHWAY SUITE 200 BOCA RATON, FL 33432	23338 LA VIDA WAY BOCA RATON, FL 33433

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
20230 BACKNINE DR.	20230 BACK NINE DR.
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: BOCA RATON FL	City & State: BOCA RATON FL
Zip: 33498 Country: USA	Zip: 33498 Country: USA.

4. FEI Number: 02-0645612 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
IVEY, NATALIE 23338 LA VIDA WAY BOCA RATON, FL 33433 AS ABOVE	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Natalie Ivey 10/29/10
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 24, 2010

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO IVEY, NATALIE 23338 LA VIDA WAY BOCA RATON, FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition CEO IVEY, NATALIE 20230 BACK NINE DR. BOCA RATON FL 33498
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP IVEY, KENNETH M 23338 LA VIDA WAY BOCA RATON, FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition COO IVEY, KENNETH 20230 BACK NINE DR. BOCA RATON FL 33498
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Admin. Dissolution removed and only late fee charged instead of reinstatement fee	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800187292538 11/01/10--01037--001 **550.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	due to clerical error by our office. SBR 11/1/10	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Natalie Ivey 10/29/10 (561) 961-9290.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #