

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015603

Entity Name: WELLNESS COACHING INC

FILED
Feb 07, 2006
Secretary of State

Current Principal Place of Business:

3462 HARNESS CIRCLE
WELLINGTON, FL 33467

New Principal Place of Business:

Current Mailing Address:

3462 HARNESS CIRCLE
WELLINGTON, FL 33467

New Mailing Address:

FEI Number: 06-1680871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JOSE CPA
12839 NW 18 TH COURT
PEMBROKE PINES, FL 333028 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHATHAM, ANTONY
Address: 3462 NHARNESS CIRCLE
City-St-Zip: WELLINGTON, FL 33467

Title: VP () Delete
Name: CHATHAM, ANNIE
Address: 3462 NHARNESS CIRCLE
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY CHATHAM

P

02/07/2006

Electronic Signature of Signing Officer or Director

Date