2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015603

FILED Jan 08, 2009 Secretary of State

Entity Name: WELLNESS COACHING INC **Current Principal Place of Business: New Principal Place of Business:** 3462 HARNESS CIRCLE WELLINGTON, FL 33449 **Current Mailing Address: New Mailing Address:** 3462 HARNESS CIRCLE WELLINGTON, FL 33449 FEI Number: 06-1680871 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: THOMAS, JOSE CPA 12839 NW 18 TH COURT PEMBROKE PINES, FL 333028 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CHATHAM, ANTONY CHATHAM, ANTONY Name: Name:

3462 NHARNESS CIRCLE 3462 NHARNESS CIRCLE Address: Address: City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: WELLINGTON, FL 33449

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

Name: CHATHAM, ANNIE Name: CHATHAM, ANNIE 3462 NHARNESS CIRCLE Address: 3462 NHARNESS CIRCLE Address: WELLINGTON, FL 33467 WELLINGTON, FL 33449 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: ANTONY CHATHAM 01/08/2009