

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026853

FILED
Jan 06, 2010
Secretary of State

Entity Name: HEALTH & WELLNESS CENTER OF PORT ST. LUCIE, INC.

Current Principal Place of Business:

433 NW PRIMA AVISTA
PORT ST LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

433 NW PRIMA AVISTA
PORT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 86-1053403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRARY, LAWRENCE E III
555 COLORADO AVE STE 1
STUART, FL 34994 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: DR.
Name: ZIEMBA, LARE
Address: 433 NW PRIMA VISTA BLVD
City-St-Zip: PORT ST LUCIE, FL 34983

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: LARE ZIEMBA

DR.

01/06/2010

Electronic Signature of Signing Officer or Director

Date