2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2010
Secretary of State

DOCUMENT# P03000048116

Entity Name: THE CENTRE FOR FAMILY MEDICINE AND WELLNESS, INC.

Current Principal Place of Business:

241 6TH AVENUE
INDIALANTIC, FL 329033303

New Principal Place of Business:

Current Mailing Address:

241 6TH AVENUE
INDIALANTIC, FL 329033303

New Mailing Address:

FEI Number: 59-3671762 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANCOCK, ELIZABETH P
241 6TH AVENUE
INDIALANTIC, FL 329033303 US

Name and Address of New Registered Agent:

PEPE, ELIZABETH M DO
241 6TH AVENUE
INDIALANTIC, FL 329033303 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: ELIZABETH PEPE 04/07/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P
Name: PEPE, ELIZABETH M
Address: 241 6TH AVENUE
City-St-Zip: INDIALANTIC, FL 329033303

Title: VP
Name: PEPE-KATALINAS, STEPHANIE
Address: 241 6TH AVENUE
City-St-Zip: INDIALANTIC, FL 329033303

Title: SEC
Name: PEPE, HELEN E
Address: 1104 SEMINOLE DR
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: STEPHANIE PEPE-KATALINAS VP 04/07/2010
Electronic Signature of Signing Officer or Director Date