

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000057740

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Entity Name:** TAPLIN'S LIVING WELL GROUP HOME, INC.

**Current Principal Place of Business:**

4303 COUNTY ROAD 64 EAST  
AVON PARK, FL 33825

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 516  
N  
AVON PARK, FL 338260516

**New Mailing Address:**

**FEI Number:** 73-1668394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAPLIN, LOUISE  
4303 COUNTY ROAD 64 EAST  
AVON PARK, FL 33825 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: TAPLIN, LOUISE  
Address: 4303 COUNTY ROAD 64 EAST  
City-St-Zip: AVON PARK, FL 33825

Title: D  
Name: TAPLIN, MACK A JR.  
Address: 4303 COUNTY ROAD 64 EAST  
City-St-Zip: AVON PARK, FL 33825

Title: D  
Name: MCKNIGHT, EMMA J  
Address: 416 EAST CAMPOR STREET  
City-St-Zip: AVON PARK, FL 33825

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: LOUISE TAPLIN

CEO

01/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date