

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094524

FILED  
May 05, 2005  
Secretary of State

Entity Name: INTEGRATED HEALTH INSTITUTE, INC.

## Current Principal Place of Business:

5250 17TH STREET, #6  
SARASOTA, FL 34235

## New Principal Place of Business:

1931 S. TUTTLE AVE  
SARASOTA, FL 34239

## Current Mailing Address:

5250 17TH STREET, #6  
SARASOTA, FL 34235

## New Mailing Address:

1931 S. TUTTLE AVE  
SARASOTA, FL 34239

FEI Number: 13-4263338

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOHERTY, KELLY  
5250 17TH STREET, #6  
SARASOTA, FL 34235 US

## Name and Address of New Registered Agent:

DOHERTY, KELLY  
1931 S. TUTTLE AVE  
SARASOTA, FL 34239 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: KELLY DOHERTY

05/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DOHERTY, KELLY LYNN  
Address: 5250 17TH STREET, #6  
City-St-Zip: SARASOTA, FL 34235

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DOHERTY, KELLY L DR  
Address: 1931 S. TUTTLE AVE  
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KELLY DOHERTY

D

05/05/2005

Electronic Signature of Signing Officer or Director

Date