## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000115861

Entity Name: RIVERWOOD BIOCONSULTING, INC.

FILED Jan 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

314 WOODVINE AVE 8909 SW 75TH STREET METAIRIE, LA 70005 GAINESVILLE, FL 32608

Current Mailing Address: New Mailing Address:

314 WOODVINE AVE 8909 SW 75TH STREET METAIRIE, LA 70005 GAINESVILLE, FL 32608

FEI Number: 20-0396140 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:

COBB, EDGAR R 2508 ANACONDA TR MAITLAND, FL 32751 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 MOLONY, JANE L MOLONY, JANE LESLIE Name: Name: 314 WOODVINE AVE 8909 SW 75TH STREET Address: Address: City-St-Zip: METAIRIE, LA 70005 City-St-Zip: GAINESVILLE, FL 32608 US

Title: DR. ( ) Delete Title: DR. (X) Change ( ) Addition

 Name:
 COBB, RONALD R
 Name:
 COBB, RONALD R

 Address:
 314 WOODVINE AVE
 Address:
 8909 SW 75TH STREET

 City-St-Zip:
 METAIRIE, LA 70005
 City-St-Zip:
 GAINESVILLE, FL 32608 US

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

SIGNATURE: JANE LESLIE MOLONY DR. 01/07/2006