

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134432

Entity Name: BODYLOGICMD, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

1499 W PALMETTO PARK RD  
405  
BOCA RATON, FL 33486

## New Principal Place of Business:

## Current Mailing Address:

1499 W PALMETTO PARK RD  
405  
BOCA RATON, FL 33486

## New Mailing Address:

FEI Number: 90-0130556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAZER AND COMPANY  
7700 W CAMINO REAL, SUITE 404  
BOCA RATON, FL 33433 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: D ( ) Delete  
Name: SAVAGE, PATRICK  
Address: 1499 W PALMETTO PARK RD, 405  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: SAVAGE, TAMARA J  
Address: 1499 W PALMETTO PARK RD  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: CASEY, RICHARD  
Address: 77 EAST HALSEY ROAD  
City-St-Zip: PARSIPPANY, NJ 07054

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: SAVAGE, PATRICK  
Address: 1499 W PALMETTO PARK RD, 405  
City-St-Zip: BOCA RATON, FL 33486

Title: O (X) Change ( ) Addition  
Name: SAVAGE, TAMARA J  
Address: 1499 W PALMETTO PARK RD  
City-St-Zip: BOCA RATON, FL 33486

Title: O (X) Change ( ) Addition  
Name: CASEY, RICHARD  
Address: 77 EAST HALSEY ROAD  
City-St-Zip: PARSIPPANY, NJ 07054

Title: D ( ) Change (X) Addition  
Name: CASEY, WILLIAM J  
Address: 315 SOUTH 4TH ST  
City-St-Zip: PHILLIPSBURG, NJ 08865

Title: D ( ) Change (X) Addition  
Name: STANTON, ALICIA M DR  
Address: 90 JONQUIL LANE  
City-St-Zip: LONGMEADOW, MA 01106

I hereby certify that the information supplied with this filing does not qualify 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: PATRICK SAVAGE

O

04/23/2009

Electronic Signature of Signing Officer or Director

Date