

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100183

FILED  
Apr 18, 2005  
Secretary of State

**Entity Name:** HEALTHY LIVING CENTERS OF AMERICA INC.

**Current Principal Place of Business:**

7620 HYANNIS LANE  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

7620 HYANNIS LANE  
PARKLAND, FL 33067

**New Mailing Address:**

**FEI Number:** 74-3125497

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CMOREY, TERRI  
7620 HYANNIS LANE  
PARKLAND, FL 33067 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: P ( ) Delete  
Name: BARNES, ROBERT  
Address: 7620 HYANNIS LANE  
City-St-Zip: PARKLAND, FL 33067

Title: V ( ) Delete  
Name: CMOREY, TERRI  
Address: 2842 KELLY BROOK LANE  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** TERRI CMOREY

VP

04/18/2005

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

\_\_\_\_\_  
Date