

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165644

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** THE CENTER FOR BEAUTIFUL MINDS INC.

## Current Principal Place of Business:

3451 BONITA SPRINGS BLVD.,  
SUITE 201  
BONITA SPRINGS, FL 34134

## New Principal Place of Business:

546 AVELLINO ISLES CIRCLE  
11202  
NAPLES, FL 34119

## Current Mailing Address:

9908 COLONIAL WALK S  
ESTERO, FL 33928

## New Mailing Address:

546 AVELLINO ISLES CIRCLE  
11202  
NAPLES, FL 34119

**FEI Number:** 20-3969655

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

INGERSOLL, NORA  
9908 COLONIAL WALK S  
ESTERO, FL 33928 US

## Name and Address of New Registered Agent:

INGERSOLL, NORA  
546 AVELLINO ISLES CIRCLE  
11202  
NAPLES, FL 34119 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: \_\_\_\_\_

04/29/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: INGERSOLL, NORA  
Address: 9908 COLONIAL WALK S  
City-St-Zip: ESTERO, FL 33928

Title: VP (X) Delete  
Name: MELVIN, SEAN R  
Address: 5470 TAMARIND RIDGE DR  
City-St-Zip: NAPLES, FL 34119 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: INGERSOLL, NORA  
Address: 546 AVELLINO ISLES CIRCLE, 11202  
City-St-Zip: NAPLES, FL 34119

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

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: NJINGERSOLL

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date