

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000019416

FILED
Mar 28, 2008
Secretary of State

Entity Name: BETTER BODIES OF LAMONT, INC.

Current Principal Place of Business:

966 N. BARBER HILL RD
LAMONT, FL 32336

New Principal Place of Business:

Current Mailing Address:

966 N. BARBER HILL RD
LAMONT, FL 32336

New Mailing Address:

FEI Number: 20-4282929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMES, ANDREW
966 N. BARBER HILL RD
LAMONT, FL 32336 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: AMES, ANDREW
Address: 966 N. BARBAR HILL RD
City-St-Zip: LAMONT, FL 32336

Title: VP () Delete
Name: MONTI, R.J.
Address: 743 RED FURN RD
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AMES, ANDREW
Address: 966 N. BARBER HILL RD
City-St-Zip: LAMONT, FL 32336

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: ANDREW AMES

P

03/28/2008

Electronic Signature of Signing Officer or Director

Date