

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020241

FILED
Aug 31, 2009
Secretary of State

Entity Name: RAY OF HOPE HEALTHY LIVING, INC.

Current Principal Place of Business:

5975 W. SUNRISE BLVD.
SUITE 206
SUNRISE, FL 33313 US

Current Mailing Address:

5975 W. SUNRISE BLVD.
SUITE 206
SUNRISE, FL 33313 US

New Principal Place of Business:

3601 W COMMERCIAL BLVD
SUITE 25
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

3601 W COMMERCIAL BLVD
SUITE 25
FORT LAUDERDALE, FL 33309 US

FEI Number: 20-4307369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITT-WITTER, LORNA
5975 W. SUNRISE BLVD.
SUITE 206
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

PITT-WITTER, LORNA
3601 W COMMERCIAL BLVD
SUITE 25
FORT LAUDERDALE, FL 33309 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: LORNA WITTER

08/31/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATKINSON, VENICE
Address: 5975 W. SUNRISE BLVD., SUITE 206
City-St-Zip: SUNRISE, FL 33313

Title: V () Delete
Name: PITT-WITTER, LORNA
Address: 5975 W. SUNRISE BLVD., SUITE 206
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ATKINSON, VENICE
Address: 3601 W COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V (X) Change () Addition
Name: PITT-WITTER, LORNA
Address: 3601 W COMMERCIAL BLVD
City-St-Zip: FORT LAUDERDALE, FL 33309

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: VENICE ATKINSON

P

08/31/2009

Electronic Signature of Signing Officer or Director

Date