

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000156566

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: YOUR HEALTH FOOD STORE, INC.

## Current Principal Place of Business:

452 WALNUT AVE  
ORANGE CITY, FL 32763 US

## New Principal Place of Business:

1196 TREE SWALLOW DR  
SUITE 1334  
WINTER SPRINGS, FL 32708 US

## Current Mailing Address:

452 WALNUT AVE  
ORANGE CITY, FL 32763 US

## New Mailing Address:

1196 TREE SWALLOW DR  
SUITE 1334  
WINTER SPRINGS, FL 32708 US

FEI Number: 20-8111511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WELLER, MICHAEL  
452 WALNUT AVE  
ORANGE CITY, FL 32763 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: WELLER, MICHAEL  
Address: 452 WALNUT AVE  
City-St-Zip: ORANGE CITY, FL 32763 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MIKE WELLER JR

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date