2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P07000023154

Entity Name: SEVENTH HEAVEN DAY SPA AND SALON, INC.

Current Principal Place of Business:

12251 N HIGHWAY 19
CHIEFLAND, FL 32626

New Principal Place of Business:

12251 N HIGHWAY 19
CHIEFLAND, FL 32626

Current Mailing Address:

12251 N HIGHWAY 19
CHIEFLAND, FL 32626

New Mailing Address:

FEI Number: 20-8497742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COTHRON, PHILLIP D
6950 NW 87TH PLACE
CHIEFLAND, FL 32626 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: PD ( ) Delete
Name: COTHRON, CARLA M
Address: 6950 NW 87TH PLACE
City-St-Zip: CHIEFLAND, FL 32626

Title: VD ( ) Delete
Name: HERRING, BRENDA E
Address: P.O. BOX 1192
City-St-Zip: CROSS CITY, FL 32628

Title: SD (X) Delete
Name: COTHRON, PHILLIP D
Address: 6950 NW 87TH PLACE
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: COTHRON, PHILLIP D
Address: 6950 NW 87TH PLACE
City-St-Zip: CHIEFLAND, FL 32626

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: CARLA M. COTHRON PRES 04/27/2009

Electronic Signature of Signing Officer or Director Date