

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000032773

FILED
Apr 28, 2010
Secretary of State

Entity Name: INTEGRATED WELLNESS PROGRAMS, INC.

Current Principal Place of Business:

8528 BASUTO DR
TRINITY, FL 34655

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 54
ELFERS, FL 34680

New Mailing Address:

8528 BASUTO DR
TRINITY, FL 34655

FEI Number: 51-0633189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINCH, JOHN K ESQ
323 MAIN ST
SAFETY HARBOR, FL 34695 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: D
Name: CARUANA, TARA M
Address: 8528 BASUTO DR
City-St-Zip: TRINITY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: TARA M. CARUANA

DIR

04/28/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date