

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088817

Entity Name: NATURAL ANALGESICS, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

8907 REGENTS PARK DRIVE
310
TAMPA, FL 33647 US

New Principal Place of Business:

8909 REGENTS PARK DRIVE
405
TAMPA, FL 33647 US

Current Mailing Address:

28403 MEADOWRUSH WAY
WESLEY CHAPEL, FL 33543 US

New Mailing Address:

FEI Number: 26-0681841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, KATHERINE B
28403 MEADOWRUSH WAY
WESLEY CHAPEL, FL 33543 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: SMITH, KATHERINE B
Address: 28403 MEADOWRUSH WAY
City-St-Zip: WESLEY CHAPEL, FL 33543

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: KATHERINE B SMITH

P

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date