

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000023096

FILED
Apr 05, 2009
Secretary of State

Entity Name: THINK THERAPY INC.

Current Principal Place of Business:

1025 LAKE SHORE DR.
203
LAKE PARK, FL 33403

New Principal Place of Business:

4400 NORTHCORP PARKWAY
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

PO BOX 530506
LAKE PARK, FL 33403

New Mailing Address:

4400 NORTHCORP PARKWAY
PALM BEACH GARDENS, FL 33410

FEI Number: 26-1715820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DANTE, MAGALY C
1025 LAKE SHORE DR.
203
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

DANTE, MAGALY C
4400 NORTHCORP PARKWAY
PALM BEACH GARDENS, FL 33410 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:

04/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DANTE, MAGALY C
Address: 1025 LAKE SHORE DR.
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DANTE, MAGALY C
Address: 4400 NORTHCORP PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: MAGALY C. DANTE

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date