

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000079027

FILED
Feb 19, 2010
Secretary of State

Entity Name: PERSONAL HEALTH ADVOCATES, INC.

Current Principal Place of Business:

1589 CLAN CAMPBELL DRIVE
RAEFORD, NC 28376

New Principal Place of Business:

Current Mailing Address:

1589 CLAN CAMPBELL DRIVE
RAEFORD, NC 28376

New Mailing Address:

FEI Number: 26-3238020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITO, CAROLINE C
6610 SKYLINE DRIVE
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

VITALE, CATHEIRNE S
1589 SE CLEARBROOK ST
PORT ST LUCIE, FL 34983 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: CATHERINE VITALE

02/19/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D
Name: VITALE, CATHERINE S
Address: 1589 CLAN CAMPBELL DRIVE
City-St-Zip: RAEFORD, NC 28376 US

Title: VP
Name: VITALE, ROBERT S
Address: 1589 CLAN CAMPBELL DRIVE
City-St-Zip: RAEFORD, NC 28376 US

Title: S
Name: BRITO, CAROLINE
Address: 6610 SKYLINE DRIVE
City-St-Zip: DELRAY BEACH, FL 33446 US

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: CATHERINE S. VITALE

PRES

02/19/2010

Electronic Signature of Signing Officer or Director

Date