

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000085006

**FILED**  
**May 09, 2012**  
**Secretary of State**

**Entity Name:** SHUMWAY WELLNESS CENTER INC

**Current Principal Place of Business:**

3079 E. COMMERCIAL BLVD., SUITE 201  
FT. LAUDERDALE, FL 33308

**New Principal Place of Business:**

2800 E. COMMERCIAL BLVD.  
SUITE 211  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

3079 E. COMMERCIAL BLVD., SUITE 201  
FT. LAUDERDALE, FL 33308

**New Mailing Address:**

2800 E. COMMERCIAL BLVD.  
SUITE 211  
FT. LAUDERDALE, FL 33308

**FEI Number:** 26-3363928

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHUMWAY, AMY DC  
3079 E. COMMERCIAL BLVD.  
201  
FT. LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

SHUMWAY, AMY DC  
2800 E. COMMERCIAL BLVD  
SUITE 211  
FT. LAUDERDALE, FL 33308 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: AS

05/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SHUMWAY, AMY  
Address: 2800 E. COMMERCIAL BLVD., SUITE 211  
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: VP  
Name: KEENER, JESSIE  
Address: 2800 E. COMMERCIAL BLVD., SUITE 211  
City-St-Zip: FT. LAUDERDALE, FL 33308 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: AS

PRES

05/09/2012

Electronic Signature of Signing Officer or Director

Date