

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000009883

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** INTUITIVE ONES INC.

**Current Principal Place of Business:**

3620 COLONIAL BLVD, STE 110  
FORT MYERS, FL 33966 US

**New Principal Place of Business:**

**Current Mailing Address:**

3620 COLONIAL BLVD, STE 110  
FORT MYERS, FL 33966 US

**New Mailing Address:**

**FEI Number:** 26-4165124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SULLIVAN, LYNN  
2709 SWAMP CABBAGE COURT  
SUITE 106  
FORT MYERS, FL 33901 US

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

SULLIVAN, LYNN  
3620 COLONIAL BLVD.  
SUITE 110  
FORT MYERS, FL 33966 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:**

01/11/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SULLIVAN, LYNN  
**Address:** 3620 COLONIAL BLVD. #110  
**City-St-Zip:** FORT MYERS, FL 33966 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:** LYNN SULLIVAN

PRES

01/11/2010

Electronic Signature of Signing Officer or Director

Date