

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000085141

FILED  
May 02, 2010  
Secretary of State

**Entity Name:** THE ASHWORTH WEIGH, P.A.

**Current Principal Place of Business:**

411 LAKEBRIDGE PLAZA DRIVE  
SUITE 101  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

411 LAKEBRIDGE PLAZA DRIVE  
SUITE 101  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 27-1113308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

ASHWORTH, LANCE  
411 LAKEBRIDGE PLAZA DRIVE  
SUITE 101  
ORMOND BEACH, FL 32174 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ASHWORTH, LANCE  
Address: 411 LAKEBRIDGE PLAZA DRIVE, SUITE 101  
City-St-Zip: ORMOND BEACH, FL 32174

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: LANCE ASHWORTH

D

05/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date