

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09103

FILED
Apr 24, 2007
Secretary of State

Entity Name: AMERICAN NATURAL HYGIENE SOCIETY, INC.

Current Principal Place of Business:

12115 WASATCH CT
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

PO BOX 30630
TAMPA, FL 33630 US

New Mailing Address:

FEI Number: 36-2692857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUTCHINS, BRYAN A
3974 TAMPA RD
SUITE A
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: EPSTEIN, MARK
Address: 1601 W. SCHOOL ST., UNIT 203
City-St-Zip: CHICAGO, IL 60657

Title: MGRM () Delete
Name: GRUDNIK, LINDA
Address: 14204 CARLSON CIR
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: HUBERMAN, MARK
Address: 4620 EUCLID BLVD
City-St-Zip: YOUNGSTOWN, OH 44512

Title: D () Delete
Name: KENNEDY, BARBARA
Address: 1535 N. TAYLOR ST
City-St-Zip: ARLINGTON, VA 22207

Title: V () Delete
Name: NOVICK, JEFF
Address: 740 W. 51ST ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: S () Delete
Name: NOWAKOWSKI, JOHN
Address: 4041 SW 72ND DRIVE
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: GRUDNIK, LINDA
Address: 12115 WASATCH COURT
City-St-Zip: TAMPA, FL 33624

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: NOVICK, JEFF
Address: 399 E. SHERIDAN ST. #408
City-St-Zip: DANIA BEACH, FL 33004

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA GRUDNIK

ED

04/24/2007

Electronic Signature of Signing Officer or Director

Date