## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # P09103**

1. Entity Name

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ARLINGTON VA 22207

MIAMI BEACH FL 33140

8506 SPRING VALE RD

NOVICK, JEFF

740 W. 51ST ST

SCHULER, ELAINE

AMERICAN NATURAL HYGIENE SOCIETY, INC.



**FILED** 

Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90462 003 \*\*\*\*61.25

				failing Address								
TAMPA FL 33626			PO BOX 30630 TAMPA FL 33630									
			US									
2. Principal Place of Business 14204 Carlson Circle 3. Mail				Mailing Address								
Suite, Apt. #, etc. S			Sui	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number 36	-2692857	, see 1 4	- ⊢-	plied For t Applicable
Zip	Country Z				ıntry		5. Certificate of Sta	\$9.75 Additional				
6. Name and Address of Current Registered				d Agent		7. Name and Address of New Registered Agent						
						Name				···		
KUTCHINS, BRYAN A 3974 TAMPA RD						Street Address (P.O. Box Number is Not Acceptable)						
SUITE A												
OLDSMAR FL 34677						City · ₽→■ Zip Code						
						City				FL	Zip Code	*
		submits this statement for	the purpo	se of changing its	registere	ed office o	r register	ed agent, or both, in t	he State of Floric	ia. I am far	niliar with, a	and accept
the obligat	tions of regist	ered agent.										
		•										
SIGNÄTURE	Signature, typed	or printed name of registered agent an	d title if appli	icable. (NOTE	: Registere	d Agent signat	ure required	when reinstating)		DATE		
							· · · · · · · · · · · · · · · · · · ·					·
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State				
10. OFFICERS AND DIRECTO			CTORS						CTORS IN	10		
TITLE	P	01110211011110	1010110	☐ Delete	11.			13311101101011111102			Change	☐ Addition
NAME	EPSTEIN,	Mark		50.0.0	NAM			•		•	<b>_</b>	
STREET ADDRESS	1601 W. S	CHOOL ST., UNIT 203			STRE	ET ADDRESS						Ì
CITY-ST-ZIP	CHICAGO	IL 60657			CITY	-ST-ZIP						1
TITLE	MGRM			☐ Delete	TITLE	Ī.				7	Change	Addition
NAME	GRUDNIK,	LINDA			NAM	E			· ·	-		İ
STREET ADDRESS	11816 RAC	CE TRACK RD			STRE	ET ADDRESS	142	04 Carlson	circle	,	. **	
CITY-ST-ZIP	TAMPA FL	33626			- CITY	-ST-ZIP	فحر سوائ			سورا روس		-
TITLE	T			☐ Delete	TITLE						Change	☐ Addition
NAME	HUBERMA				NAM							
	4620 EUC					ET ADDRESS						}
CITY-ST-ZIP		OWN OH 44512			CITY	-ST-ZIP						
TITLE	D			☐ Delete	TITLE					<u> </u>	Change	Addition
NAME KENNEDY, BARBARA					NAM	_		•				}
STREET ADDRESS	1 1 6 2 6 N T	T2 Q() (V)			CIDE	ET ADDDESS	ı					

SILVER SPRING MD 20910 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ Delete

☐ Delete

4/23/02

813-855-6607

☐ Change

☐ Change

Addition

☐ Addition

Affachment

- 80093 H8 P09103

## Additional Directors:

Alan Goldhamer, D.C. 4310 Lichau Road Penngrove, CA 94951

Joel Fuhrman, M.D. 22 Buchanan Way Flemington, NJ 08822