

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000017201

FILED
Mar 27, 2012
Secretary of State

Entity Name: SUN HEALTH AND WELLNESS, INC

Current Principal Place of Business:

401 E. HINSON AVE
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

401 E. HINSON AVE
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 27-1979594 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KODE, KRISHNA K
5612 BURNSIDE CIRCLE
TALLAHASSEE, FL 32312 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: P
Name: KODE, KRISHNA K
Address: 5612 BURNSIDE CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP
Name: KODE, VIJAYA S
Address: 8117 CHAMPIONS CIRCLE APT 204
City-St-Zip: CHAMPIONS GATE, FL 33896

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: VIJAYA KODE

_____ Electronic Signature of Signing Officer or Director

VP

03/27/2012

_____ Date