

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049125

FILED  
Mar 15, 2011  
Secretary of State

**Entity Name:** VITRUVIAN HEALTH CORPORATION

**Current Principal Place of Business:**

593 COUNTY ROAD 448  
TAVARES, FL 32778

**New Principal Place of Business:**

353 PLAZA DRIVE  
EUSTIS, FL 32726

**Current Mailing Address:**

593 COUNTY ROAD 448  
TAVARES, FL 32778

**New Mailing Address:**

2922 TEMPLE HILL RD  
LADY LAKE, FL 32159

**FEI Number:** 27-2856605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, AMBER M  
593 COUNTY ROAD 448  
TAVARES, FL 32778 US

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

JOHNSON, AMBER M P  
2922 TEMPLE HILL RD  
LADY LAKE, FL 32159 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: AMBER JOHNSON

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JOHNSON, AMBER M  
Address: 2922 TEMPLE HILL ROAD  
City-St-Zip: LADY LAKE, FL 32159

Title: VP  
Name: SCHULTZ, GREGORY W JR.  
Address: 23550 KAYS WAY  
City-St-Zip: ASTATULA, FL 34705

Title: T  
Name: JOHNSON, AMBER M  
Address: 2922 TEMPLE HILL RD  
City-St-Zip: LADY LAKE, FL 32159

Title: S  
Name: SCHULTZ, GREGORY W JR  
Address: 23550 KAYS WAY  
City-St-Zip: ASTATULA, FL 34705

Title: CEO  
Name: JOHNSON, AMBER M  
Address: 2922 TEMPLE HILL RD  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: JOHNSON, AMBER M  
Address: 2922 TEMPLE HILL RD  
City-St-Zip: LADY LAKE, FL 32159

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: AMBER JOHNSON

P

03/15/2011

Electronic Signature of Signing Officer or Director

Date