

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000056335

FILED
Apr 28, 2012
Secretary of State

Entity Name: ALL NATURAL COMMUNITY HEALTH & WELLNESS SPA, INC

Current Principal Place of Business:

610 NW 15TH MANOR
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

610 NW 15TH MANOR
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 27-3077668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RHONE, VICKIE D
610 NW 15TH MANOR
POMPANO BEACH, FL 33060 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: RHONE, VICKIE D
Address: 610 NW 15TH MANOR
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: VP
Name: FREELOVE, LARRY D SR
Address: 1161 CHATEAU PARK DR
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: D
Name: STATES, DEBBIE L
Address: 1316 NW 65TH TERRACE
City-St-Zip: MARGATE, FL 33063 FL

Title: D
Name: ROSE, MARIA
Address: 398 FLORIDA AVENUE
City-St-Zip: FTM LAUDERDALE, FL 33312 US

Title: D
Name: GOODING, TONYA
Address: 600 SW 22ND TERRACE
City-St-Zip: FT LAUDERDALE, FL 33312 US

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: VICKIE D. RHONE

P

04/28/2012

Electronic Signature of Signing Officer or Director

Date