

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000091467

FILED
Jun 10, 2011
Secretary of State

Entity Name: HEALTHY COMMUNITY CONNECTION, INC.

Current Principal Place of Business:

1870 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

1870 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LAW OFFICES OF PAUL J. BURKHART, PL
800 VILLAGE SQUARE CROSSING
PALM BEACH GARDENS, FL 33410 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: KING, MINERVA
Address: 16764 121ST TERRACE W
City-St-Zip: JUPITER, FL 33478

Title: VP
Name: KING, CHARLES
Address: 16764 121ST TERRACE W
City-St-Zip: JUPITER, FL 33478

Title: S
Name: KHALIQ, AFIFA
Address: 4490 CAMROSE LANE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D
Name: MABRY, LARRY
Address: 1870 FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL 33406

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: AFIFA KHALIQ

MS.

06/10/2011

Electronic Signature of Signing Officer or Director

Date