

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33596

FILED
Apr 23, 2010
Secretary of State

Entity Name: THE INSTITUTE FOR MOBILITY AND LONGEVITY, INC.

Current Principal Place of Business:

1309 N FLAGLER DR
WEST PALM BCH, FL 33401 US

New Principal Place of Business:

1210 S. OLD DIXIE HWY
JUPITER, FL 33458 US

Current Mailing Address:

PO BOX 248
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: 04-2981081 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAILE, SHAW & PFAFFENBERGER
660 US HIGHWAY 1
THIRD FLOOR
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

LOPASKY, MARK
2401 PGA BLVD
#196-24
PALM BEACH GARDENS, FL 33410 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: MARK LOPASKY

04/23/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MONTELLO, LAURENCE
Address: 2401 PGA BLVD #280
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D
Name: HEARTFIELD, BETSY
Address: 1210 S. OLD DIXIE HWY
City-St-Zip: JUPITER, FL 33458

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURENCE MONTELLO, D

D

04/23/2010

Electronic Signature of Signing Officer or Director

Date