

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076021

FILED  
Jul 13, 2004  
Secretary of State

Entity Name: THE HEALTH BASKET, INC.

**Current Principal Place of Business:**

10601 US HWY 441  
C-7  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

37901 LAKE DALHOUSIE DR  
EUSTIS, FL 32736

**New Mailing Address:**

FEI Number: 59-3206784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINCHER, FLOYD M  
37901 LAKE DALHOUSIE DR.  
EUSTIS, FL 32726 US

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

FINCHER, FLOYD M  
37901 LAKE DALHOUSIE DR.  
EUSTIS, FL 32736 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: FLOYD M. FINCHER

07/13/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FINCHER, FLOYD M  
Address: 37901 LAKE DALHOUSE DR.  
City-St-Zip: EUSTIS, FL 32726

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FLOYD M. FINCHER

PD

07/13/2004

Electronic Signature of Signing Officer or Director

Date