## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000074706

Entity Name: KOENIG NATURAL HEALTH, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2375 BAYOU LANE 100 AVIATION DRIVE SOUTH

#6 #200 NAPLES, FL 34112 US NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

2375 BAYOU LANE 100 AVIATION DRIVE SOUTH # 6 # 200

# 200 # 200 NAPLES, FL 34112 US NAPLES, FL 34104

FEI Number: 65-0523701 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NICK, PAUL 2400 TAMIAMI TRAIL NORTH # 201 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PSTD ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 KOENIG, CAROLA
 Name:
 KOENIG, CAROLA

 Address:
 6862 STERLING GLEENS DRIVE, #202
 Address:
 2375 BAYOU LANE, #6

 City-St-Zip:
 NAPLES, FL 34104
 City-St-Zip:
 NAPLES, FL 34112 US

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: CAROLA KOENIG PSTD 01/05/2005