## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000081980

1. Corporation Name

NATURAL SOLUTIONS DISTRIBUTORS, INC.

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90049 013 \*\*\*150.00



8. Name and Address of Current Registered Agent  RUTTER, CAROLE 144 OAKWOOD DR: NAPLES FL 34110  82 Street Address (P.O. Box Number is Not Acceptable) 57.35 Ced.on. Spring Dr., # 203  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida. Such change was authorized by the Corporation's board of directors. I hereby accept the depolariment as registered agent. and accept the odifications of Section 607.0505. Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  RUTTER, CAROLE 12. STREET ADDRESS 13. STREET ADDRESS 14. OAKWOOD DR: NAME 13. STREET ADDRESS 14. OAKWOOD DR: NAME 14. OAKWOOD DR: NAME 15. STREET ADDRESS 16. OAKWOOD DR: NAME 16. OAKWOOD DR: NAME 17. ST.29  18. OELETE 18. O						
NAPLES FL 34110  US  1. Do NOT WRITE IN THIS SPACE  2. Principal Piezo of Business 2. Principal Piezo of Business 2. Principal Piezo of Business 2. Suite, Apt. 8, etc. 2. The Control of Suite Desired 2. Suite, Apt. 8, etc. 2. The Control of Suite Desired 2. And I Control of Suite Desired 3. And I Control of Suite Desired Suite I Control of Suite I Control o	Principal Place	of Business	Mailing Address		L A MATT MAN FIN INNT L DEREN ANDERE ANDERE	STATUT SELECT TOTAL TOTAL CONT. DOLL TO DE
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Trust Fund Contribution   Addded to Fiess   Ad	City & State		<del> </del>		6. Election Campaign Financing	\$5.00 May Be
21	⊢¬ `.,		$\vdash$ $\wedge \wedge \wedge$	82		
S. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name   10.			Zip -3/Lun-	Country	8. This corporation owes the current ye	
8. Name and Address of Current Registered Agent  RUTTER, CAROLE 144 OAKWOOD DR: NAPLES FL 34110  15 Street Address (P.O. Box Number is Not Acceptable)  16 City  17 FL  18 Street Address (P.O. Box Number is Not Acceptable)  18 Street Address (P.O. Box Number is Not Acceptable)  19 Street Address (P.O. Box Number is Not Acceptable)  19 Street Address (P.O. Box Number is Not Acceptable)  19 Street Address (P.O. Box Number is Not Acceptable)  19 Street Address (P.O. Box Number is Not Acceptable)  10 Street Address (P.O. Box Number is Not Acceptable)  11 Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Sisturies, the above-named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Proficia. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent are not accept the obligations of Section 07.0505, Florida Sisturies.  SIGNATURE  12 OFFICERS AND DIRECTORS  13 ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  12 Number   Delette   13 Time     Change   Addition    NAME   STREET ADDRESS   23 STREET ADDRESS   24 GTY-57-2P    TIME   DELETE   STREET ADDRESS   24 GTY-57-2P    TIME   DELETE   STREET ADDRESS   34 GTY-57	24 341	25	29 24110 30	····		
RUTTER, CAROLE 164-OAKWOOD DR: NAPLES FL 34110  82 Street Address (P.O. Box Number is Not Acceptable) 5/35 Cedan Spring Dr., #203  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature, speed were of registered agent and the familiar statement of the provisions of Section 607 0505, Florida Statutes.  SIGNATURE  Signature, speed were of registered agent and the familiarity of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OFFICERS AND DIRECTORS  15. TITLE  15.		9. Name and Address of Current	Registered Agent		10. Name and Address of New Regist	ered Agent
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent are registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approximent are registered agent, and familiar with, and accept the obligations of, Section 607.0005, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OFFICERS AND DIRECTORS. IN 12.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  16. OFFICERS AND DIRECTORS. IN 12.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12.  18. ADDITIONS/CHANGES TO OFFICE	- C. 14-1	TED CABOLE		81 Name		
NAPLES FL 34110  83  44 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I and familiar with, and accept the obligations of, Section Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. NADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  PRUTER, CAROLE 1.3 TIME 1.2 NAME 1.3 TIME 1.3				82 Street Add		D- #-727
B4   City   FL   88   Zip Code	}			5/	35 Cedan Springs	Vr., # 205
11. Pursuant to the provisions of Sections 607 0502 and 607 1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent ag	i NAPL	LES PL 34110		83	•	
11. Pursuant to the provisions of Sections 607 0502 and 607 1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such accepts the provision of th				84 City		85 Zip Code
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I netrely accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I netrely accept the appointment as registered agent, or both, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or protect norms of registered agent and title if applicable.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  D DELETE  1.1 TITLE  D Change Addition  NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZPP  NAPLES FL 34110  DELETE  2.1 TITLE  NAME  1.2 NAME  1.3 STREET ADDRESS  2.2 STREET ADDRESS  2.3 STREET ADDRESS  2.4 CITY-ST-ZPP  TITLE  D DELETE  3.1 TITLE  D DELETE  4.1 TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	_					1 1
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of regulated agent and the # spoklable. (NOTE: Repotented Agent agentare required when rendating)   DATE	11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, the	he above-named con rized by the corpora:	rporation submits this statement for the purpo tion's board of directors. I hereby accept the	se of changing its registered appointment as registered
12. OFFICERS AND DIRECTORS  TITLE  NAME RUTTER, CAROLE STREET ADDRESS STREET ADDR	agent. I ar	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes.		
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

HOLDEQUIRED
NAME OF SIGNING OFFICER OR DIRECTOR