

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000076935

FILED
Apr 20, 2010
Secretary of State

Entity Name: ADVANCED NURSING PRACTICE CENTER FOR WELLNESS, INC.

Current Principal Place of Business:

1003 S ALEXANDER ST
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 817
LITHIA, FL 33547 US

New Mailing Address:

FEI Number: 59-3365865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOONEY, SANDRA A
1003 S. ALEXANDER STREET
PLANT CITY, FL 33563 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: MOONEY, SANDRA A
Address: 2003 S. ALEXANDRA STREET
City-St-Zip: PLANT CITY, FL 33563

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: SANDRA A MOONEY

PRES

04/20/2010

Electronic Signature of Signing Officer or Director

Date