

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000044496

Entity Name: SONOMA THERAPY, INC.

FILED  
Mar 27, 2011  
Secretary of State

## Current Principal Place of Business:

300 S INTERLACHEN AVE  
APT 204  
WINTER PARK, FL 32789 US

## New Principal Place of Business:

## Current Mailing Address:

300 S INTERLACHEN AVE  
APT 204  
WINTER PARK, FL 32789 US

## New Mailing Address:

300 S INTERLACHEN AVE  
APT 204  
WINTER PARK, FL 32789 US

FEI Number: 65-0678677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELLEFSSEN, KRISTINE A  
3345 OAK DRIVE  
HOLLYWOOD, FL 33021 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

## OFFICERS AND DIRECTORS:

Title: PD  
Name: ANDERSON, JOHN H  
Address: 300 S INTERLACHEN AVE # 204  
City-St-Zip: WINTER PARK, FL 32789 US

Title: SD  
Name: ANDERSON, KATHRYN K  
Address: 300 S INTERLACHEN AVE # 204  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VPD  
Name: ANDERSON, AMANDA C  
Address: 300 S INTERLACHEN AVE #204  
City-St-Zip: WINTER PARK, FL 32789 US

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: JOHN H ANDERSON

PD

03/27/2011

Electronic Signature of Signing Officer or Director

Date