

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000073859

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE NEW YOU OF ORLANDO, INC.

Current Principal Place of Business:

1954 HOWELL BRAND RD.
#112
WINTER PARK, FL 32792 US

Current Mailing Address:

1954 HOWELL BRAND RD.
#112
WINTER PARK, FL 32792 US

New Principal Place of Business:

1954 HOWELL BRANCH RD.
#112
WINTER PARK, FL 32792 US

New Mailing Address:

1954 HOWELL BRANCH RD.
#112
WINTER PARK, FL 32792 US

FEI Number: 59-3421703 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLIER, BARBARA C
1860 SMOKETREE CIRCLE
APOPKA, FL 32779 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: PD () Delete
Name: HILLIER, DAVID G
Address: 1954 HOWELL BRAND RD., #112
City-St-Zip: WINTER PARK, FL 32792 US

Title: VPD () Delete
Name: HILLIER, CHERYLL
Address: 1954 HOWELL BRAND RD., #112
City-St-Zip: WINTER PARK, FL 32792 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HILLIER, DAVID G
Address: 1860 SMOKETREE CIRCLE
City-St-Zip: APOPKA, FL 32712 US

Title: VPD (X) Change () Addition
Name: HILLIER, BARBARA C
Address: 1860 SMOKETREE CIRCLE
City-St-Zip: APOPKA, FL 32712 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARBARA CHERYLL HILLIER

VPD

04/30/2008

Electronic Signature of Signing Officer or Director

Date