

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000020463

**Entity Name:** HERB SHOP OF PANAMA CITY, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7505 THOMAS DR.  
UNIT 813  
PANAMA CITY BEACH, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

7505 THOMAS DR.  
UNIT 813  
PANAMA CITY BEACH, FL 32408

**New Mailing Address:**

FEI Number: 59-3484062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOWELL, EMILY S  
7505 THOMAS DRIVE  
UNIT #813  
PANAMA CITY, FL 32408 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: PRES  
Name: HOWELL, EMILY S  
Address: 7505 THOMAS DRIVE, UNIT #813  
City-St-Zip: PANAMA CITY, FL 32408

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: EMILY S. HOWELL

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date