

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063275

FILED
Mar 31, 2011
Secretary of State

Entity Name: MESSAGE THERAPY SPECIALISTS, INC.

Current Principal Place of Business:

1080 CLOVERLEAF CIRCLE
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 984
BROOKSVILLE, FL 34605 US

New Mailing Address:

FEI Number: 59-3523660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALSTED, SHARON
1080 CLOVERLEAF CIRCLE
BROOKSVILLE, FL 34601 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: P
Name: WALSTED, SHARON R
Address: 1080 CLOVERLEAF CIRCLE
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: S
Name: WALSTED, SHARON R
Address: 1080 CLOVERLEAF CIRCLE
City-St-Zip: BROOKSVILLE, FL 34601 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: SHARON R. WALSTED

PRES

03/31/2011

Electronic Signature of Signing Officer or Director

Date