

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000097465

Entity Name: FULL POTENTIAL, INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

3403 WASHINGTON LANE
COOPER CITY, FL 33026

New Principal Place of Business:

Current Mailing Address:

4430 FAIRFAX DR
CUMMING, GA 30040

New Mailing Address:

FEI Number: 65-0879461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMARDESE, DAVID
3403 WASHINGTON LANE
COOPER CITY, FL 33026 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: PTD () Delete
Name: HERNANDEZ, LEONEL
Address: 4430 FAIRFAX DR
City-St-Zip: CUMMING, GA 30040

Title: S () Delete
Name: HERNANDEZ, ILEANA
Address: 4430 FAIRFAX DR
City-St-Zip: CUMMING, GA 30040

Title: AVP () Delete
Name: FIELDS, KAROLYN
Address: 4345 FAIRFAX DR
City-St-Zip: CUMMING, GA 30040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: HERNANDEZ, LEONEL
Address: 4430 FAIRFAX DR
City-St-Zip: CUMMING, GA 30028

Title: S (X) Change () Addition
Name: HERNANDEZ, ILEANA
Address: 4430 FAIRFAX DR
City-St-Zip: CUMMING, GA 30028

Title: AVP (X) Change () Addition
Name: FIELDS, KAROLYN
Address: 4345 FAIRFAX DR
City-St-Zip: CUMMING, GA 30028

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: LEONEL HERNANDEZ

PTD

01/06/2009

Electronic Signature of Signing Officer or Director

Date