

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000050604

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** AMERICAN INSTITUTE FOR INTEGRAL HEALING ARTS, INC.

**Current Principal Place of Business:**

7122 MANDARIN ROAD  
SARASOTA, FL 34276

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18755  
SARASOTA, FL 34234

**New Mailing Address:**

FEI Number: 59-3580532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WATKINS, CARL T  
7345 JACKSON SPRINGS RD.  
TAMPA, FL 33634 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: D  
Name: STULTS, MICHAEL S  
Address: PO BOX 18755  
City-St-Zip: SARASOTA, FL 34276

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: MICHAEL STULTS

D

04/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date