

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S36309

Entity Name: NUTRISUPPLIES, INC.

FILED  
Jan 28, 2009  
Secretary of State

## Current Principal Place of Business:

8118 IBIS RESERVE CIRCLE  
WEST PALM BEACH, FL 33412

## New Principal Place of Business:

11242 OSPREY LAKE LANE  
WEST PALM BEACH, FL 33412

## Current Mailing Address:

8118 IBIS RESERVE CIRCLE  
WEST PALM BEACH, FL 33412

## New Mailing Address:

P.O. BOX 221285  
WEST PALM BEACH, FL 33422

FEI Number: 65-0247662

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARTMAN, DON  
11242 OSPREY LAKE LANE  
WEST PALM BEACH, FL 33412 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: P ( ) Delete  
Name: HARTMAN, DON  
Address: 11242 OSPREY LAKE LN  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: ST (X) Delete  
Name: BARRON, GARRY  
Address: 1250 EAST HALLENDALE BEACH BLVD  
City-St-Zip: HALLENDALE BEACH, FL 33009

Title: V ( ) Delete  
Name: HARTMAN, ALEC  
Address: 1220 BEAR ISLAND DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DON HARTMAN

P

01/28/2009

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

\_\_\_\_\_  
Date