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 617, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD W MOULTON

Electronic Signature of Signing Officer/Director Detail

SIGNATURE	: DR. RICHARD W. MOULTON			04/28/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	D	Title	D		
Name	MOULTON, RICHARD W DR.	Name	MOULTON, NANCY A		
Address	1631 INDIAN DANCE CT	Address	1631 INDIAN DANCE CT		
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751		
Title	D				
Name	LAVERGHETTA, MINDY J				
Address	527 PALMER ST				

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.

# 0

City-State-Zip: ORLANDO FL 32801

Entity Name: THE CANCER CURE EXPERIMENT, INC.

**Current Principal Place of Business:** 

DOCUMENT# N1000001508

#### **Current Mailing Address:**

1631 INDIAN DANCE CT MAITLAND, FL 32751

#### **FEI Number: NOT APPLICABLE**

## Name and Address of Current Registered Agent:

MOULTON, RICHARD W DR. 1631 INDIAN DANCE CT MAITLAND, FL 32751 US

1631 INDIAN DANCE CT MAITLAND, FL 32751

### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

04/28/2016

Date

FILED Apr 28, 2016 Secretary of State CC0341842681

MANAGING DIRECTOR