

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003296

Entity Name: THE CENTER FOR PRANIC HEALING AND WELLNESS, INC.

Current Principal Place of Business:

206 CENTER STREET
SUITE B
GULF BREEZE, FL 32561

Current Mailing Address:

107 BAYBRIDGE
GULF BREEZE, FL 32561

FEI Number: 20-2596860

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, CONNIE
107 BAYBRIDGE DRIVE
GULF BREEZE, FL 32561 US

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

Officer/Director Detail :

Title PRES
Name WILLIAMS, CONNIE
Address 107 BAYBRIDGE
City-State-Zip: GULF BRREZE FL 32561

Title VICE
Name FAIRLEIGH, VICKI
Address 96 CHANTECLAIRE CIRCLE
City-State-Zip: GULF BREEZE FL 32561

Title SECR
Name LOTT, MARY ELLEN
Address 616 NORTH BARCELONA
City-State-Zip: PENSACOLA FL 32501

Title TREA
Name WILLIAMS, KENNETH
Address 107 BAYBRIDGE DR.
City-State-Zip: GULF BREEZE FL 32561

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: KENNETH L. WILLIAMS DC

TREASURE

02/25/2015

Electronic Signature of Signing Officer/Director Detail

Date