#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003296

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

FILED
Jan 25, 2016
Secretary of State
CC4076575837

# **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 Title VICE

Name WILLIAMS, CONNIE Name FAIRLEIGH, VICKI

Address 107 BAYBRIDGE Address 96 CHANTECLAIRE CIRCLE
City-State-Zip: GULF BRREZE FL 32561 City-State-Zip: GULF BREEZE FL 32561

Title SECR Title TREA

NameLOTT, MARY ELLENNameWILLIAMS, KENNETHAddress616 NORTH BARCELONAAddress107 BAYBRIDGE DR.City-State-Zip:PENSACOLA FL 32501City-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 WILLIAMS

**TREASURE** 

01/25/2016