2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2015
Secretary of State
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Entity Name: DUVAL CENTER FOR HEALTH & WELLNESS, INC.

Current Principal Place of Business:

2247 PALM BEACH LAKES BLVD
SUITE 108
WEST PALM BEACH, FL 33409

Current Mailing Address:

2247 PALM BEACH LAKES BLVD
SUITE 108
WEST PALM BEACH, FL 33409 US

FEI Number: 27-3305187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUVAL, YANIQUE M.D.
2247 PALM BEACH LAKES BOULEVARD
108
WEST PALM BEACH, FL 33409 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	P	Title	VP
Name	ROZEFORT, EDELYNE	Name	PROPHETE, JACQUELINE
Address	7446 BRUNSWICK CIRCLE	Address	10860 S.W. 135TH TERRACE
City-State-Zip:	BOYNTON BEACH FL 33472	City-State-Zip:	MIAMI FL 33176

Title	S/T
Name	CURTIS, IVETTE
Address	1754 PIERSIDE CIRCLE
City-State-Zip:	WELLINGTON FL 33414

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: EDELYNE ROZEFORT PRESIDENT 04/21/2015

Electronic Signature of Signing Officer/Director Detail — Date