

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002250

Entity Name: MCGORDON'S HEALTH & WELLNESS CENTER, INC

Current Principal Place of Business:

1038 N WALKER AVE
LAKELAND, FL 33805

Current Mailing Address:

P.O. BOX 90154
LAKELAND, FL 33804-0154 US

FEI Number: 90-0804773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGORDON, JACQUELINE G
1038 N WALKER AVE
LAKELAND, FL 33805 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
Name MCGORDON, JACQUELINE F
Address 1038 N WALKER AVE
City-State-Zip: LAKELAND FL 33805

Title S
Name COTTLE, JONATHAN
Address 1038 N WALKER AVE
City-State-Zip: LAKELAND FL 33805

Title VP
Name WILLIAMS, ROSLYN
Address 939 W 10TH ST
City-State-Zip: LAKELAND FL 33805

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: JACQUELINE MCGORDON

OWNER

01/20/2021

Electronic Signature of Signing Officer/Director Detail

Date