

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009623

**Entity Name:** RELIANCE HOLISTIC CENTER INC

**Current Principal Place of Business:**

1720 DUNBAR LANE  
CLEARWATER, FL 33756

**Current Mailing Address:**

1720 DUNBAR LANE  
CLEARWATER, FL 33756

**FEI Number: 47-2130924**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FERNANDEZ, DIONISIA  
4202 W WATERS AVENUE  
4  
TAMPA, FL 33614 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 BONATTO, IARA  
Address 1720 DUNBAR LANE  
City-State-Zip: CLEARWATER FL 33756  
  
Title C  
Name AYELO, LARRY  
Address 4630 BAY COURT ABE WEST  
City-State-Zip: TAMPA FL 33603

Title CEO  
Name BONATTO, IARA  
Address 1720 DUNBAR LANE  
City-State-Zip: CLEARWATER FL 33756  
  
Title AR  
Name FERNANDEZ, DIONISIA  
Address 4202 W WATERS AVENUE SUITE 4  
City-State-Zip: TAMPA FL 33614

*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: IARA BONATTO**

**PRESIDENT**

**05/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date