

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000009062

**Entity Name:** HEALING PLACE.SPACE INC

**Current Principal Place of Business:**

1349 INTERNATIONAL PARKWAY SOUTH  
SUITE 2421  
LAKE MARY, FL 32746

**Current Mailing Address:**

PO BOX 471484  
LAKE MONROE, FL 32747 US

**FEI Number: 81-3852194**

**Certificate of Status Desired: No**

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

NAVE, PATRICK J  
1203 MURCOTT COURT  
LONGWOOD, FL 32779 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 NAVE, PATRICK J  
Address 211 BRUSHCREEK DRIVE  
City-State-Zip: SANFORD FL 32771

Title VP  
Name BENNETT, JOHN  
Address 107 BUNKER LANE  
City-State-Zip: SANFORD FL 32771

Title SEC  
Name CANNAVINO, DIENA M  
Address 128 MEADOW AVENUE  
City-State-Zip: SANFORD FL 32771

*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: PATRICK NAVE**

**DIRECTOR**

**02/27/2018**

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

\_\_\_\_\_  
Date