

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000007343

**Entity Name:** LIVING WELL FOUNDATION. INC.

**Current Principal Place of Business:**

1961 NW 150 AVE #101  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

1961NW 150 AVE,  
101  
PEMBROKE PINES, FL 33028 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FLORIDA ASSOCIATION OF NONPROFITS  
512 NE THIRD AVENUE  
FORT LAUDERDALE, FL 33301 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 TORRES, MICHAEL  
Address 1961 NW 150 AVE  
101  
City-State-Zip: PEMBROKE PINES FL 33028

Title SEC  
Name LAKES, PRIME GROUP OF THE  
Address 1961 NW 150 AVE  
101  
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR  
Name ARRIETA, IVALUZ  
Address 1961 NW 150 AVE #101  
City-State-Zip: PEMBROKE PINES FL 33028

*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:** MICHAEL TORRES

**PRES**

**04/11/2024**

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

\_\_\_\_\_  
Date