

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M99051

Entity Name: NUTRI-WEST OF FLORIDA, INC.

Current Principal Place of Business:

C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
LAND O LAKES, FL 34639

Current Mailing Address:

C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
LAND O LAKES, FL 34639

FEI Number: 59-2912044

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARDS, CONNIE
6223 PARKWAY BLVD
LAND O LAKES, FL 34639 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 D
Name EDWARDS, CONNIE L
Address C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
City-State-Zip: LAND O LAKES FL 34639

Title D
Name EDWARDS, LEE A
Address C/O CONNIE EDWARDS
6223 PARKWAY BLVD.
City-State-Zip: LAND O LAKES FL 34639

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CONNIE L EDWARDS

DIRECTOR

03/24/2020

Electronic Signature of Signing Officer/Director Detail

Date