

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000053163

**Entity Name:** A BRIDGE TO WELLNESS, INC.

**Current Principal Place of Business:**

316 E. 4TH PLAIN BLVD  
SUITE B  
VANCOUVER, WA 98663-3074

**Current Mailing Address:**

815 E. 29TH ST.  
VANCOUVER, WA 98663-2713

**FEI Number: 59-3721684**

**Certificate of Status Desired: No**

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

ALRON ENTERPRIZE  
3990 MINTON ROAD  
MELBOURNE, FL 32904 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 VIGEANT, GARY H  
Address 815 E. 29TH ST  
City-State-Zip: VANCOUVER WA 98663-2713

Title S  
Name OCASIO, LINDA  
Address 815 E. 29TH ST  
City-State-Zip: VANCOUVER WA 98663-2713

*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: GARY H VIGEANT**

**PRESIDENT**

**02/21/2015**

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

\_\_\_\_\_  
Date