

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073949

Entity Name: THERAKIDS, INC.

Current Principal Place of Business:

1325 SE 25TH LOOP
102
OCALA, FL 34471

Current Mailing Address:

1325 SE 25TH LOOP
102
OCALA, FL 34471

FEI Number: 81-0559814

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUNER, ELON N
6760 NW 48TH TERRACE
OCALA, FL 34482 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 BRUNER, ELON N
Address 6760 NW 48TH TERRACE
City-State-Zip: Ocala FL 34482

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: ELON N BRUNER

OWNER

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date