# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P11000001606

# Entity Name: AMERICAN SCHOOL OF NATURAL HEALTH, INC.

# **Current Principal Place of Business:**

601 CLEVELAND STREET, SUITE #390 CLEARWATER, FL 33755

# **Current Mailing Address:**

601 CLEVELAND STREET, SUITE #390 CLEARWATER, FL 33755 US

# FEI Number: 27-4484861

## Name and Address of Current Registered Agent:

LYONS, GARY W 311 SOUTH MISSOURI AVENUE CLEARWATER, FL 33756 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: GARY W LYONS

Electronic Signature of Registered Agent

## Officer/Director Detail :

TitleP, S, T, DNameKEPPLER, HERMANNAddressUNIT-1, BULRUSHES FARM, COOMBEHILL RDHILL RDCity-State-Zip:EAST GRINSTEAD, WEST SUSSEX<br/>RH19-4LZ

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.

PRESIDENT

## SIGNATURE: HERMANN KEPPLER

Electronic Signature of Signing Officer/Director Detail

FILED Mar 06, 2015 Secretary of State CC8188513521

Certificate of Status Desired: No

03/06/2015 Date

03/06/2015 Date