

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000016617

Entity Name: NATURAL WELLNESS AND CHIROPRACTIC, INC.

Current Principal Place of Business:

6 DORADO BEACH CT
ORMOND BEACH, FL 32174

Current Mailing Address:

660 FLORIDA CENTRAL PKWY
LONGWOOD, FL 32750 US

FEI Number: 45-4606780

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, JEANNIE
6 DORADO BEACH CT.
ORMOND BEACH, FL 32174 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 JOHNSON, JEANNIE
Address 660 FLORIDA CENTRAL PKWY
City-State-Zip: LONGWOOD FL 32750

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: JEANNIE JOHNSON

PRESIDENT

04/25/2018

Electronic Signature of Signing Officer/Director Detail

Date