

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000044810

Entity Name: NATURAL BALANCE MASSAGE THERAPY & WELLNESS
CENTER, INC.

Current Principal Place of Business:

350 U.S. ALTERNATE 19 N.
SUITE A
PALM HARBOR, FL 34683

Current Mailing Address:

350 U.S. ALTERNATE 19 N.
SUITE A
PALM HARBOR, FL 34683 US

FEI Number: 45-5279469

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STASNEY, RASHAEL CAIN
350 U.S. ALTERNATE 19 N.
SUITE A
PALM HARBOR, FL 34683 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: RASHAEL CAIN STASNEY

03/12/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name STASNEY, RASHAEL CAIN
Address 350 U.S. ALTERNATE 19 N.
SUITE A
City-State-Zip: PALM HARBOR FL 34683

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: RASHAEL CAIN STASNEY

PRESIDENT

03/12/2020

Electronic Signature of Signing Officer/Director Detail

Date