

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000053533

**Entity Name:** BODIES IN TRANSITION, INC.

**Current Principal Place of Business:**

18817 OAKLAND HILLS DRIVE  
HIALEAH, FL 33015

**Current Mailing Address:**

18817 OAKLAND HILLS DRIVE  
HIALEAH, FL 33015 US

**FEI Number:** 47-4475199

**Certificate of Status Desired:** No

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

BLOODWORTH, PATRICIA L MS.  
18817 OAKLAND HILLS DRIVE  
HIALEAH, FL 33015 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 BLOODWORTH, PATRICIA L  
Address 18817 OAKLAND HILLS DRIVE  
City-State-Zip: HIALEAH FL 33015

Title T  
Name COLLIER, GREGORY F  
Address 18817 OAKLAND HILLS DRIVE  
City-State-Zip: HIALEAH FL 33015

Title S  
Name GUY, RAMCES  
Address 18817 OAKLAND HILLS DRIVE  
City-State-Zip: HIALEAH FL 33015

Title EXECUTIVE SECRETARY  
Name JOHNSON, JESSICA JAYDA  
Address 18817 OAKLAND HILLS DRIVE  
City-State-Zip: HIALEAH FL 33015

*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:** PATRICIA BLOODWORTH

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01/26/2019

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

\_\_\_\_\_  
Date