

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000060765

**Entity Name:** DR. NATALIE WALKER CONSULTING INC.

**Current Principal Place of Business:**

1122 W 6TH STREET  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

1122 W 6TH STREET  
JACKSONVILLE, FL 32209

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

FLORIDA FINANCIAL SOLUTIONS INC.  
301 W BAY STREET  
14129  
JACKSONVILLE, FL 32202 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 WALKER, NATALIE  
Address 1122 W 6TH STREET  
City-State-Zip: JACKSONVILLE FL 32209

*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: DR. NATALIE WALKER**

**PRESIDENT**

**04/24/2023**

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

\_\_\_\_\_  
Date