

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000043723

Entity Name: LAKE LIFE AND HEALTH INC

Current Principal Place of Business:

500 S FLORIDA AVE
SUITE 415 PMB 1124
LAKELAND, FL 33801

Current Mailing Address:

500 S FLORIDA AVE
SUITE 415 PMB 1124
LAKELAND, FL 33801

FEI Number: 93-1723163

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AARONSON, PETER M
500 S FLORIDA AVE
SUITE 415 PMB 1124
LAKELAND, FL 33801 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 AARONSON, PETER
Address 500 S FLORIDA AVE, SUITE 415 PMB
1124
City-State-Zip: LAKELAND FL 33801

Title VP
Name AARONSON, GENNA A
Address 500 S FLORIDA AVE, SUITE 415 PMB
1124
City-State-Zip: LAKELAND FL 33801

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: GENNA AARONSON

VP

04/08/2024

Electronic Signature of Signing Officer/Director Detail

Date