

**2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P95000078127

**Entity Name:** NATURAL LIFE COLLECTIONS, INC.

**Current Principal Place of Business:**

901 7TH AVE S  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

901 7TH AVE S  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number: 59-3341788**

**Certificate of Status Desired: Yes**

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

COOK, KEVIN B ESQ.  
818 A1A NORTH  
SUITE 302  
PONTE VEDRA BEACH, FL 32082 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:** KEVIN B. COOK, ESQ.

**10/27/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name PATRICIA L, HUGHES  
Address 401 PONTE VEDRA BLVD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SECRETARY  
Name MEIDE, CINDY E  
Address 1203 9TH AVE N  
City-State-Zip: JACKSONVILLE BEACH FL 32250-3624

Title VP  
Name MEIDE, CINDY E  
Address 1203 9TH AVE N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title TREASURER  
Name LESLI A, SCHMACHTENBERGER  
Address 21 SOLANA RD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*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:** CINDY E MEIDE

**VP/SECRETARY**

**10/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date