

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000006723

**Entity Name:** TREE OF LIGHT WHOLE BODY REJUVENATION CENTER, LLC

**Current Principal Place of Business:**

806 NEAPOLITAN WAY  
NAPLES, FL 34103

**Current Mailing Address:**

806 NEAPOLITAN WAY  
NAPLES, FL 34103 US

**FEI Number: 83-0745911**

**Certificate of Status Desired: No**

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

PARKER, DONA L  
16372 CORSICA WAY  
#201  
NAPLES, FL 34110 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:** DONA L PARKER

03/21/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR, MBR  
Name PARKER, DONA L  
Address 16372 CORSICA WAY  
#201  
City-State-Zip: NAPLES FL 34110

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DONA PARKER

MMBR

03/21/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date