

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000109165

**Entity Name:** HEIDI'S FEEL GOOD FOODS, LLC

**Current Principal Place of Business:**

2060 MARILYN ST  
227  
CLEARWATER, FL 33765

**Current Mailing Address:**

100 S. BELCHER RD  
7345  
CLEARWATER, FL 33765 US

**FEI Number:** 83-4589914

**Certificate of Status Desired:** No

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

CHRISTIANE, WEGLER  
2060 MARILYN ST  
227  
CLEARWATER, FL, FL 33765 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

**Authorized Person(s) Detail :**

Title AR  
Name WEGLER, ROLAND  
Address 1820 DREW ST  
City-State-Zip: CLEARWATER FL 33765

Title AMBR  
Name WEGLER, CHRISTIANE  
Address 1820 DREW ST  
City-State-Zip: CLEARWATER FL 33765

*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:** CHRISTIANE WEGLER

**OWNER**

**02/28/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date