

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # 750937 (5)

1. Corporation Name

WELLNESS, INC.

95 APR -5 PM 3: 14

Principal Place of Business

Mailing Address

~~750 S.W. 2ND AVE. STE. 555 --
P.O. BOX 749 --
GAINESVILLE FL 32602 --~~

8930 NW 39TH AVENUE
P.O. BOX 749
GAINESVILLE FL 32606
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/05/1980** 3a. Date of Last Report **04/25/1994**
4. FEI Number **59-2011032** Applied For ☐
Not Applicable ☐

2. Principal Place of Business

2a. Mailing Address

21 8930 N.W. 39th Avenue

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Gainesville, FL

28

Zip

Country

Zip

Country

24 32606

25

USA

29

30

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DEMONTMOLLIN, STEPHEN J
8930 NW 39TH AVENUE
GAINESVILLE FL 32606**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DS	FRENCH, ROYAL	8930 NW 39TH AVE	GAINESVILLE FL
DT	DURRANCE, JACK	8930 NW 39TH AVENUE	GAINESVILLE FL
D	POWELL, RODGER	8930 N.W. 39TH AVENUE	GAINESVILLE FL
PB-	PEDDIE, EDWARD C	8930 NW 39TH AVENUE	GAINESVILLE FL
D	COSBY, EDGAR	8930 NW 39TH AVENUE	GAINESVILLE FL
DVC-	MCKINLEY, PAUL	8930 NW 39TH AVENUE	GAINESVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	☐	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	☐	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	☒	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

E.C. Peddie **E.C. PEDDIE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/95

Date

(904) 372-8400

Daytime Phone #

WELLNESS, INC.**BOARD OF DIRECTORS***(cont.)*

D	Dinkins, Arnold	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Carmichael, Majorie	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	McGranahan, Bob	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Fletcher, T.J.	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Roark, Steven	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Chance, Jean	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Green, Buzzy	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Mounger, William	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Moore, Jim	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Townsend, Wallace	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Bullard, Audrey	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Hetzel, Alan	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Scott, Olivia	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Martsof, Mary	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Johns, Linda	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Stechmiller, Bruce	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Rozboril, Michael	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Daniel, C.B.	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Wise, Sandra	8930 N.W. 39th Avenue	Gainesville, FL 32606
D/VC	Williams, James	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Ayers, Isabelle	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	O'Neil, Gerald	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Owen, Mark	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Johnson, James	8930 N.W. 39th Avenue	Gainesville, FL 32606
D	Nell, Cathy	8930 N.W. 39th Avenue	Gainesville, FL 32606