

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L35222

(3)

1. Corporation Name

NATURE'S TREASURES, INC.



Principal Place of Business

78 LEXINGTON DRIVE
DUNEDIN FL 34698

Mailing Address

78 LEXINGTON DRIVE
DUNEDIN FL 34698

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/11/1989

3a. Date of Last Report

01/30/1995

21. State, Apt. #, etc.

26. State, Apt. #, etc.

4. FEI Number

59-2979453

Applied For

Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23. Zip Country

28. Zip Country

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24. Zip Country

29. Zip Country

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

WAGNER, BONNIE L.
7190 SEMINOLE BLVD.
SEMINOLE FL 34642

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 of Registered Agent or Agent for Service of Process

Signature of Registered Agent or Agent for Service of Process

DATE

12. OFFICERS AND DIRECTORS

1. NAME	PTD	☐ DELETE
2. STREET ADDRESS	WAGNER, DOUGLAS A.	
3. CITY, STATE, ZIP	78 LEXINGTON DRIVE	
4. NAME	DUNEDIN FL	
5. NAME	VSD	☐ DELETE
6. STREET ADDRESS	WAGNER, BONNIE L.	
7. CITY, STATE, ZIP	78 LEXINGTON DRIVE	
8. NAME	DUNEDIN FL	
9. NAME		☐ DELETE
10. STREET ADDRESS		
11. CITY, STATE, ZIP		
12. NAME		☐ DELETE
13. STREET ADDRESS		
14. CITY, STATE, ZIP		
15. NAME		☐ DELETE
16. STREET ADDRESS		
17. CITY, STATE, ZIP		
18. NAME		☐ DELETE
19. STREET ADDRESS		
20. CITY, STATE, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☒ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	34698
5. NAME	☐ Change ☒ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	34698
9. NAME	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. NAME	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	
17. NAME	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, STATE, 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bonnie L. Wagner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BONNIE L. WAGNER

1/16/96

Date

813-391-9756

Daytime Phone #

CR2E034 (12/95)