FILE NOW: FILING FEE IS \$61.25

Mailing Address

2840 PROCTOR ROAD

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2840 PROCTOR ROAD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

N96000001458 (6) DOCUMENT #

HOLISTIC HEALTH WORKS, INC.

| 4. FEI Number 65-0850539 | SARASOTA FL US | 34231 | SARASOTA FL 34231 US | | | 03/11/1996 | | | |
|--|---|--------------------------------|-------------------------|------------|-----------|--|--------------|-------------|--|
| 2. Principal Place of Business 2a. Mailing Address 2b. Certificate of Status Desired \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.50.0 May Be Trust Fund Contribution \$5.00 May Be Added fees \$8.50.0 May Be Trust Fund Contribution \$5.00 May Be Added fees \$8.50.0 May Be Trust Fund Contribution \$6.50.0 May Be Trust Fund Contribution \$6. | 03 | | US . | | | | Ar | oplied For | |
| 2. Principal Place of Business 1. Additional Fee Regulard 2. Sulte, Apt. #, etc. 3. Sulte, Apt. #, etc. 4. Sulte, Apt. #, et | | | | | | 65-0650539 | | | |
| City & State Trust Fund Contribution Added to Fees Trust Fund Contribution Country Zip Country E. This corporation owes or has paid the current year Intenglible Personal Property Tax due June 30. Xiv se \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 2. Principal P | Place of Business | ├ | | | | | | |
| Zip Country Zip Country Zip Country B. This corporation owes or has paid the ourrent year intengible Personal Property Tax due June 30. Yes No | | | | | | | | | |
| Solution | City & Stat | · — — · | | | | | | | |
| The properties of the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above a suthorized by the proporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporations beared the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporations beared the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporations beared the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the appropriations beared the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 12. Corp. Corp | Zip 24 | 25 | 29 | ¬ ` ' | <i>'</i> | Personal Property Tax due June 30. | 🔀 Yes 🛚 | | |
| ## City Sarasota 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board to the provisions of Section 617.0502 and 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board to the provisions of changing its registered agent, and the first or printed astatutes. SIGNATURE ## Corq. Received Agent signature of superior and the first or printed astatutes. In the signature of the or printed name of septemed Agent signature of the appointment as registered agent in the first or printed name of septemed Agent signature of the appointment as registered Agent signature of the appointment as registered agent. I should be appointed when far signature of the appointment as registered agent agent and the first agent and the first agent ag | | 9. Name and Address of Current | Registered Agent | | | Name and Address of New Register | ered Agent | | |
| STREET ADDRESS ### PTD NAME WEBB, HARVEY JR STREET ADDRESS ### PTD NAME ### P | | | | 81 | '''' (| SeorgeR. Rozelle | | | |
| STREET ADDRESS B3 So. raseta. B4 City Saraseta. B5 Zip Code 34/232 B6 Zip Code 34/232 B6 Zip Code 34/232 B7 Zip Code 34/ | | | | | Street Ac | Idress (P.Q. Box Number is Not Acceptable) | le. | | |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the Exprovation's board agent and directors. Line purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the Exprovation's board at directors. Line purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the Exprovation's board at directors. Line purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the Exprovation's board at directors. Line purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the Exprovation's board at directors. Line purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the Exprovation's board at directors. Line purpose of changing its registered agent, or both agent | - SARASOTA FL 04230-6059 - | | | | | | <u> </u> | | |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered eightic or price directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statules. SIGNATURE Corp. R. Rozelle, Presiden Proportion Proporti | | | | | City S | arasota FL 85 Zip Code | | | |
| TITLE NAME WEBB, HARVEY JR STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34286 CITY-ST-ZIP SARASOTA FL 34231 TITLE D WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34288 TITLE D WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34288 TITLE D WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34288 TITLE D WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34231 TITLE D WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34288 TITLE S WEBB, ZADIE O STREET ADDRESS | ř | George R. Rozelle P | resident | | Leo. | 1090 TOGOT | 4/29/98 | registered | |
| WEBB, HARVEY JR STREET ADDRESS 6801 RUFF STREET CITY-ST-ZIP NORTH PORT FL 34288 DELETE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP STREET ADDRESS 1.5 STREET ADDRESS | 12. | OFFICERS AND | DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR | RS IN 12 | |
| STREET ADDRESS 6601 RUFF STREET CITY-ST-ZIP NORTH PORT FL 34286 TITLE VSD DELETE 21 TITLE VOGELE, JEAN J STREET ADDRESS 1957 CROSS CREEK ROAD CITY-ST-ZIP SARASOTA FL 34231 TITLE D NAME WEBB, ZADIE O STREET ADDRESS 6601 RUFF ST. STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP NORTH PORT FL 34288 1.3 STREET ADDRESS 5 SARASOTA, FL 34231 Change Addition Change Addition Addition STREET ADDRESS 31 STREET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS 54 SARASOTA, FL 34231 | TITLE | PTD | DELETE | 1.1 TITLE | | - - - | Change | Addition | |
| STREET ADDRESS 6601 RUFF STREET CITY-ST-ZIP NORTH PORT FL 34286 TITLE VSD DELETE 21 TITLE VOGELE, JEAN J STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34231 TITLE D Change Addition Addition AMME WEBB, ZADIE O STREET ADDRESS 6601 RUFF ST. STREET ADDRESS 6601 RUFF ST. 1.3 STREET ADDRESS 2440 Proctor Rd. Sarasota, FL 34231 Change Addition Addition Piecuch, Joyce D. 31 TITLE Piecuch, Joyce D. 33 STREET ADDRESS 6601 RUFF ST. STREET ADDRESS Addition STREET ADDRESS ACITY-ST-ZIP NORTH PORT FL 34268 34. CITY-ST-ZIP Sarasota, FL 34231 | NAME | WEBB, HARVEY JR | · | 1.2 NAME | | Rozelle, George R. | | • | |
| TITLE VSD □ DELETE 21 TITLE □ Change □ Addition NAME VOGELE, JEAN J 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP D □ Change □ Addition STREET ADDRESS SARASOTA FL 34231 2.4 CITY-ST-ZIP D □ Change □ Change □ Addition NAME WEBB, ZADIE O 3.1 TITLE Piecuch, Joyce D. □ Change □ Addition STREET ADDRESS 6601 RUFF ST. 3.3 STREET ADDRESS 1315 Landings Dr. STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS ADDRESS STREET ADDRESS STRE | STREET ADORESS | | | 1.3 STREE | ADDRESS | 2840 Proctor Rd. | | | |
| TITLE VSD DELETE 2.1 TITLE Change Addition NAME VOGELE, JEAN J STREET ADDRESS 1957 CROSS CREEK ROAD STREET ADDRESS SARASOTA FL 34231 ITILE D SPELETE 3.1 TITLE D Change Addition Addition DELETE 3.1 TITLE D Change Addition Addition Addition Piecuch, Joyce D. STREET ADDRESS 6601 RUFF ST. STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Sarasota, FL 34231 | City-ST-7IP | NORTH PORT FL 34286 | | 1.4 CITY-1 | ST-7IP | Sarasota, FL 34231 | | | |
| STREET ADDRESS CITY-SI-ZIP SARASOTA FL 34231 TITLE D STREET ADDRESS CITY-SI-ZIP D Change Addition AMME WEBB, ZADIE O STREET ADDRESS 6601 RUFF ST. CITY-SI-ZIP NORTH PORT FL 34268 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP D Change Change Addition 3.1 TITLE D Change Change Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP Sarasota, FL 34231 | | | ☐ DELETE | | | | Change | Addition | |
| STREET ADDRESS CITY-SI-ZIP SARASOTA FL 34231 TITLE D STREET ADDRESS CITY-SI-ZIP D Change Addition AMME WEBB, ZADIE O STREET ADDRESS 6601 RUFF ST. CITY-SI-ZIP NORTH PORT FL 34268 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP D Change Change Addition 3.1 TITLE D Change Change Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP Sarasota, FL 34231 | NAME | VOGELE, JEAN J | | 2.2 NAME | | | | | |
| CITY-ST-ZIP SARASOTA FL 34231 TITLE D D DELETE 3.1 TITLE D D DELETE S.2 NAME STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34268 2.4 CITY-ST-ZIP D D D DELETE S.3 TITLE D D D DELETE S.3 TITLE D D D D DELETE S.4 Addition D D D D D D D D D D D D D D D D D D D | | | | 2.3 STREET | ADDRESS | | | | |
| TITLE D NAME WEBB, ZADIE O STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34268 D Change Addition Addition 1317 Landings Dr. 1315 Landings Dr. Sarasota, FL 34231 | • | | | | | 1 - 1 | , T | | |
| NAME WEBB, ZADIE O 32 NAME Piecuch, Joyce D. STREET ADDRESS CITY-ST-ZIP NORTH PORT FL 34268 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP Sarasota, FL 34231 | | | DELETE | | | _ | Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP | | . WEBB, ZADIE O | | | | Piecuch, Joyce D. | | | |
| CITY-ST-ZIP NORTH PORT FL 34268 34.CITY-ST-ZIP Sarasota, FL 34231 | | | | | ADDRESS | 1315 Landings Dr. | | | |
| 413-43-411 (| | | | | | Sarasota, FL 34231 | | | |
| | | | DELETE | | O, 211 | | ☐ Change | Addition | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

5.4 CITY - ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

NAME

CITY-ST-ZIP

941-927-8464

Change

Change

Addition

Addition

FILED

May 14 1998 8:00am

Secretary of State