

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90166 016 ***150.00

DOCUMENT # P97000039077

1. Entity Name

21st Century Wellness, INC. ✓

DO NOT WRITE IN THIS SPACE

656485

2. Principal Place of Business

6935 30th Sq.

Suite, Apt. #, etc.

106

3. Mailing Address

P.O. Box 690882

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Vero Beach FL

City & State

Vero Beach FL

4. FEI Number

65-0750773

Applied For

Not Applicable

Zip

32966

Country

USA

Zip

32968-0882

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name JERRILS, William A. SR.

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

6935 30th Sq. #106

City Vero Beach FL

Zip Code

32966

**DO NOT WRITE
IN THIS SPACE**

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D. JERRILS, William A. Sr.
6935 30th Sq. #106
Vero Beach, FL 32966

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D. JERRILS, Ellen S.
6935 30th Sq. #106
Vero Beach, FL 32966

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

William A. Jerrils Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 2002 772/453-3341

Date

Daytime Phone #

CR2E034B (12/01)