

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002637

Entity Name: THE FOUNDATION FOR WELLNESS PROFESSIONALS, INC.

Current Principal Place of Business:

1231 S. MYRTLE AVE.
CLEARWATER, FL 33756

Current Mailing Address:

1231 S. MYRTLE AVE.
CLEARWATER, FL 33756 US

FEI Number: 04-3749724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SINGER, DAVID
1231 S. MYRTLE AVE.
CLEARWATER, FL 33756 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

Officer/Director Detail :

Title P
Name SINGER, DAVID
Address 2775 NW 49TH AVE
SUITE 205-361
City-State-Zip: OCALA FL 34482

Title D
Name SINGER, DAVID
Address 2775 NW 49TH AVE
SUITE 205-361
City-State-Zip: OCALA FL 34482

Title V
Name SINGER, DAVID
Address 2775 NW 49TH AVE.
SUITE 205-361
City-State-Zip: OCALA FL 34482

Title D
Name SINGER, DAVID
Address 2775 NW 49TH AVE.
SUITE 205-361
City-State-Zip: OCALA FL 34482

Title S
Name SINGER, DAVID
Address 2775 NW 49TH AVE.
SUITE 205-361
City-State-Zip: OCALA FL 34482

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID SINGER

PRESIDENT

01/04/2024

Electronic Signature of Signing Officer/Director Detail

Date