## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000956

Entity Name: LYMPHEDEMA RESOURCES, INC.

**FILED** May 09, 2019 **Secretary of State** 8896148404CC

## **Current Principal Place of Business:**

501 GOODLETTE RD, N. SUITE C106 NAPLES. FL 34102

## **Current Mailing Address:**

POST OFFICE BOX 1115 ESTERO, FL 33929 US

FEI Number: 20-2246162 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WELLUM, JOHN S 501 GOODLETTE RD. N. SUITE C106 NAPLES, FL 34102 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: JOHN S. WELLUM 05/09/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title SEC

HAUENSTEIN, CLAIRE S BISSELL, SARAH Name Name 309 FERRIS HILLS Address 7555 GARRY ROAD Address City-State-Zip: FT. MYERS FL 33967 CANANDAIGUA NY 14424 City-State-Zip:

Title **PRESIDENT** Title **TREA** Name WELLUM, JOHN Name SPEAS, JACQUELYN

Address 501 GOODLETTE ROAD N, Address 13681 DOCTOR'S WAY

SUITE C-106

City-State-Zip: FT. MYERS FL 33912 City-State-Zip: NAPLES FL 34102

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: CLAIRE HAUENSTEIN VICE PRESIDENT 05/09/2019

Date