

2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N15000007594

Entity Name: HEALING WOMEN HEALING NATIONS OF JACKSONVILLE INC.

Current Principal Place of Business:

8151 ALDERMAN RD
306
JACKSONVILLE, FL 32211

Current Mailing Address:

8151 ALDERMAN RD
306
JACKSONVILLE, FL 32211

FEI Number: 47-4711424

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUTURE IMPRESSIONS LLC
8151 ALDERMAN RD
306
JACKSONVILLE, FL 32211 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: MICHELLE ANGELIQUE POITIER

11/01/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name POITIER, MICHELLE A
Address 8151 ALDERMAN RD 306
City-State-Zip: JACKSONVILLE FL 32211

Title VD
Name BAKER, CEANDRA
Address 3750 SILVERBLUFF BVD 1908
City-State-Zip: JACKSONVILLE FL 32065

Title T
Name HAYNES, BELINDA
Address 7035 PHILLIPS HWY
City-State-Zip: JACKSONVILLE FL 32216

Title S
Name SMITH, JACQUELINE
Address 5260 COLLINS RD 1002
City-State-Zip: JACKSONVILLE FL 32244

Title VC
Name HEATH, EUGENE
Address 8532 STAPLEHURST DR W
City-State-Zip: JACKSONVILLE FL 32256

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: MICHELLE ANGELIQUE POITIER

PRESIDENT

11/01/2016

Electronic Signature of Signing Officer/Director Detail

Date