

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000005383

**Entity Name:** WELLNESS ENERGY INSTITUTE, INC.

**Current Principal Place of Business:**

5435 PARK CENTRAL CT  
NAPLES, FL 34109

**Current Mailing Address:**

5435 PARK CENTRAL CT  
NAPLES, FL 34109 US

**FEI Number: 83-0774420**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SCHULZE, LENKA  
5435 PARK CENTRAL CT  
NAPLES, FL 34109 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:** LENKA SCHULZE

03/27/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SCHULZE, LENKA  
Address        5435 PARK CENTRAL CT  
City-State-Zip: NAPLES FL 34109

Title            DIR  
Name            RAGONESI, FRANK  
Address        21430 PELICAN CENTER BLVD.,  
                 SUITE #102  
City-State-Zip: ESTERO FL 33928

Title            DIR  
Name            TENEYCK, CYNTHIA  
Address        3125 EARLMOORE LANE  
City-State-Zip: ANN ARBOR MI 48105

*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:** LENKA SCHULZE

PRESIDENT

03/27/2020

Electronic Signature of Signing Officer/Director Detail

Date