

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078209

Entity Name: SOUTHSIDE COUNSELING BIOFEEDBACK & STRESS
MANAGEMENT CENTER INC.

Current Principal Place of Business:

3390 KORI ROAD
13
JACKSONVILLE, FL 32257-2419

Current Mailing Address:

712 MUSKOGEE LANE
JACKSONVILLE, FL 32259

FEI Number: 90-0042238

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STANFORD, THERESA G
712 MUSKOGEE LANE
JACKSONVILLE, FL 32259 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 PTD
Name STANFORD, THERESA G
Address 712 MUSKOGEE LANE
City-State-Zip: JACKSONVILLE FL 32259

Title VSD
Name STANFORD, ROBERT J
Address 712 MUSKOGEE LANE
City-State-Zip: JACKSONVILLE FL 32259

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THERESA STANFORD

OWNER

04/24/2020

Electronic Signature of Signing Officer/Director Detail

Date