2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2016
Secretary of State
CC6981359118

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Entity Name: KRISTOL HEALING CENTER INC

Current Principal Place of Business:

2427 UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217

Current Mailing Address:

2427 UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217

FEI Number: 26-1995420

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KRISTOL, BRUCE
2427 UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217 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	Title	V.P.
Name	KRISTOL, MARIELLEN	Name	KRISTOL, BRUCE
Address	7243 SAN JOSE BLVD	Address	7243 SAN JOSE BLVD.
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	JACKSONVILLE FL 32217

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: MARIELLEN KRISTOL PRESIDENT 04/13/2016

Electronic Signature of Signing Officer/Director Detail — Date