

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000059279

**Entity Name:** CENTER FOR ACUPUNCTURE & NATURAL HEALTH, INC.

**Current Principal Place of Business:**

3333 ATLANTIC BOULEVARD  
SUITE 2  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

3333 ATLANTIC BOULEVARD  
SUITE 2  
JACKSONVILLE, FL 32207 US

**FEI Number:** 45-2644234

**Certificate of Status Desired:** No

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

HOPKINS, ELIZABETH E  
3333 ATLANTIC BOULEVARD  
SUITE 2  
JACKSONVILLE, FL 32207 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:** ELIZABETH E. HOPKINS

04/28/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HOPKINS, ELIZABETH E  
Address 3333 ATLANTIC BOULEVARD  
SUITE 2  
City-State-Zip: JACKSONVILLE FL 32207

*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:** ELIZABETH HOPKINS

PRES

04/28/2016

Electronic Signature of Signing Officer/Director Detail

Date