

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000031442

Entity Name: CENTRAL PARK WELLNESS CLINIC, INC.

Current Principal Place of Business:

1713 W OAK RIDGE RD
ORLANDO, FL 32809

Current Mailing Address:

1713 W OAK RIDGE RD
ORLANDO, FL 32809 US

FEI Number: 92-3715147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEOUGH, SHAUN
3505 LAKE LYNDA DR STE 200
ORLANDO, FL 32817 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 D
Name TRAN, PHUONG
Address 1713 W OAK RIDGE RD
City-State-Zip: ORLANDO FL 32809

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: TRAN, PHUONG

D

01/22/2024

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date