

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000051525

**Entity Name:** PHYSICS OF WELLNESS ACADEMY, INC.

**Current Principal Place of Business:**

906 PINEAPPLE ROAD  
DAYTONA, FL 32119

**Current Mailing Address:**

906 PINEAPPLE ROAD  
DAYTONA, FL 32119

**FEI Number: 84-3999422**

**Certificate of Status Desired:** No

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

LACOUR, JEFFREY T DR.  
906 PINEAPPLE ROAD  
DAYTONA, FL 32119 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            CEO  
Name            LACOUR, JEFFREY T DR.  
Address        906 PINEAPPLE ROAD  
City-State-Zip: DAYTONA FL 32119

*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: JEFFREY LACOUR PHD**

**CEO**

**02/04/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date