

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000072580

**Entity Name:** NIKI BRYAN SPA MANAGEMENT, INC.

**Current Principal Place of Business:**

7700 MUNICIPAL DR  
ORLANDO, FL 32819

**Current Mailing Address:**

7700 MUNICIPAL DR  
ORLANDO, FL 32819 US

**FEI Number:** 59-3336924

**Certificate of Status Desired:** No

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

BRYAN, NIKI  
7700 MUNICIPAL DR  
ORLANDO, FL 32819 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 CHAIRMAN  
Name BRYAN, NIKI T  
Address 7700 MUNICIPAL DR  
City-State-Zip: ORLANDO FL 32819

Title PRESIDENT  
Name SHACKLETON-JONES, DANIEL  
Address 7700 MUNICIPAL DR  
City-State-Zip: ORLANDO FL 32819

Title CHAIRMAN  
Name WEISS, ALLEN R  
Address 7700 MUNICIPAL DR  
City-State-Zip: ORLANDO FL 32819

Title CFO  
Name WETTSTEIN, TED A  
Address 7700 MUNICIPAL DR  
City-State-Zip: ORLANDO FL 32819

*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:** TED WETTSTEIN

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date