

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000100456

**Entity Name:** NATURE'S TIME, INC.

**Current Principal Place of Business:**

5 CLIFFORD DRIVE  
SUITE #5  
SHALIMAR, FL 32579

**Current Mailing Address:**

5 CLIFFORD DRIVE  
SUITE #5  
SHALIMAR, FL 32579

**FEI Number:** 59-3505651

**Certificate of Status Desired:** No

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

ANGLEA, J R  
5 CLIFFORD DRIVE  
SHALIMAR, FL 32579 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 PD  
Name ANGLEA, J. R  
Address 117A CEDAR AVENUE  
City-State-Zip: FORT WALTON BEACH FL 32548

Title VPD  
Name ANGLEA, J. R  
Address 5 CLIFFORD DRIVE  
City-State-Zip: SHALIMAR FL 32579

Title STD  
Name ANGLEA, J. R  
Address 5 CLIFFORD DRIVE  
City-State-Zip: SHALIMAR FL 32579

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:** J.R. ANGLEA

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01/10/2013

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

\_\_\_\_\_  
Date