

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000016677

Entity Name: CENTER FOR FAMILY HEALTH & WELLNESS, INC.

Current Principal Place of Business:

5900 HIATUS ROAD
SUITE 100
COOPER CITY, FL 33330-4527

Current Mailing Address:

C/O GRUBER AND ASSOCIATES, P.A.
2400 EAST COMMERCIAL BOULEVARD SUITE 1
FORT LAUDERDALE, FL 33308 US

FEI Number: 65-0826164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCVAY, KIRK E
5900 HIATUS ROAD
SUITE 100
COOPER CITY, FL 33330-4527 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 MCVAY, KIRK E
Address 5900 HIATUS ROAD, SUITE 100
City-State-Zip: COOPER CITY FL 33330-4527

Title D
Name MCVAY, VALERIE
Address 5900 HIATUS ROAD, SUITE 100
City-State-Zip: COOPER CITY FL 33330-4527

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: KIRK E. MCVAY

D

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date