

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000037454

Entity Name: EXECUTIVE WELLNESS & FITNESS, LLC

Current Principal Place of Business:

4467 WHISPERING INLET DRIVE
JACKSONVILLE, FL 32277

Current Mailing Address:

4467 WHISPERING INLET DRIVE
JACKSONVILLE, FL 32277 US

FEI Number: 46-2367608

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENSEN, CASSANDRA MB
4467 WHISPERING INLET DRIVE
JACKSONVILLE, FL 32277 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: CASSANDRA MARIE BRUCE JENSEN

03/28/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name JENSEN, CASSANDRA MB
Address 4467 WHISPERING INLET DRIVE
City-State-Zip: JACKSONVILLE FL 32277

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CASSANDRA MB JENSEN

PRESIDENT

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date