

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000124369

**Entity Name:** HEALING STONE THERAPY SERVICES, LLC

**Current Principal Place of Business:**

2451 MCMULLEN BOOTH ROAD  
SUITE 220  
CLEARWATER, FL 33759

**Current Mailing Address:**

81 BAY WOODS DRIVE  
SAFETY HARBOR, FL 34695

**FEI Number:** 30-2485063

**Certificate of Status Desired:** No

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

NODZON, JOAN E  
81 BAY WOODS DRIVE  
SAFETY HARBOR, FL 34695 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

**Authorized Person(s) Detail :**

Title            AUTHORIZED REPRESENTATIVE  
Name            NODZON, JOAN  
Address        81 BAY WOODS DRIVE  
City-State-Zip: SAFETY HARBOR FL 34695

*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:** JOAN NODZON

**OWNER**

**06/01/2020**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date