# AMENDED ANNUAL REPORT

Corporation Division
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**E-FILED**
May 30, 2023
**OREGON SECRETARY OF STATE**

**REGISTRY NUMBER**

157663692

**REGISTRATION DATE**

07/16/2019

**BUSINESS NAME**

OREGON WEIGHT & WELLNESS, P.C.

**BUSINESS**

MEDICAL CLINIC FOR THE TREATMENT OF OBESITY FOCUSED ON LIFESTYLE MODIFICATION FOR WELLNESS

**MAILING ADDRESS**

1557 TALBOT RD
JEFFERSON OR 97352 USA

**TYPE**

DOMESTIC PROFESSIONAL CORPORATION

**PRIMARY PLACE OF BUSINESS**

1557 TALBOT RD SE
JEFFERSON OR 97352 USA

**JURISDICTION**

OREGON

**REGISTERED AGENT**

66932881 - THE POST LAW FIRM, P.C.

200 FERRY ST SW
ALBANY OR 97321 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

**PRESIDENT**

JULIE A GILBERT

1557 TALBOT RD
JEFFERSON OR 97352 USA

**SECRETARY**

JULIE A GILBERT

1557 TALBOT RD
JEFFERSON OR 97352 USA

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

**ELECTRONIC SIGNATURE**

**NAME**

JULIE A GILBERT

**TITLE**

DIRECTOR

**DATE**

05-30-2023