

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000058431

FILED
Apr 13, 2007
Secretary of State

Entity Name: ASGARDHEALTH EATING DISORDER ENTERPRISES, LLC

Current Principal Place of Business:

1675 PALM BEACH LAKES BOULEVARD, SUITE 700
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1675 PALM BEACH LAKES BOULEVARD, SUITE 700
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 20-5004001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGELL CORPORATE SERVICES, INC.
ONE NORTH CLEMATIS STREET, SUITE 400
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

ASGARD GROUP, INC.
1675 PALM BEACH LAKES BOULEVARD
SUITE 700
WEST PALM BEACH, FL 33401 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: BRADFORD S. LOVETTE, PRESIDENT

04/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: LOVETTE, BRADFORD S PRES
Address: 1675 PALM BEACH LAKES BLVD., STE 700
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BRADFORD S. LOVETTE

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04/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date