

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065108

Entity Name: SHARED WELLNESS, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

2795 LANTANA LAKES DRIVE WEST
JACKSONVILLE, FL 32246

New Principal Place of Business:

4801 SECRET HARBOR DRIVE NORTH
JACKSONVILLE, FL 32257

Current Mailing Address:

2795 LANTANA LAKES DRIVE WEST
JACKSONVILLE, FL 32246

New Mailing Address:

4801 SECRET HARBOR DRIVE NORTH
JACKSONVILLE, FL 32257

FEI Number: 20-5388347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORN, REBECCA E
2795 LANTANA LAKES DRIVE WEST
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

DORN, REBECCA E
4801 SECRET HARBOR DRIVE NORTH
JACKSONVILLE, FL 32257 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: _____

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DORN, REBECCA E
Address: 2795 LANTANA LAKES DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DORN, REBECCA E
Address: 4801 SECRET HARBOR DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify 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: REBECCA E. DORN

MGR

04/07/2009

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