2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000330763

Entity Name: WELLNESS CENTER OF PALM HARBOR LLC

Current Principal Place of Business:

10205 WILSKY BLVD TAMPA, FL 33625

Current Mailing Address:

10205 WILSKY BLVD TAMPA, FL 33625 US

FEI Number: 88-3458347 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROIANI, JOSEPH GENE DR. 10205 WILSKY BLVD TAMPA, FL 33625 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: DR JOSEPH TROIANI 02/05/2025

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MANAGER

Name TROIANI, JOSEPH GENE DR.

Address 10205 WILSKY BLVD City-State-Zip: TAMPA FL 33625

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.

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

FILED Feb 05, 2025

Secretary of State

0190368284CC

Date