

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040932

FILED
Mar 27, 2006
Secretary of State

Entity Name: AMERICAN WEIGHT LOSS CENTERS OF FLORIDA LLC

Current Principal Place of Business:

2385 TAMPA RD
SUITE 1
PALM HARBOR, FL 34683

New Principal Place of Business:

250 PINE AVE N
SUITE A
OLDSMAR, FL 34677

Current Mailing Address:

8610 TWIN FARMS PLACE
TAMPA, FL 33635

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BEAUCHAMP, ANTHONY R
8610 TWIN FARMS PLACE
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BEAUCHAMP, ANTHONY R
Address: 8610 TWIN FARMS PLACE
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY BEAUCHAMP MGR 03/27/2006

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