

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000920

FILED
Apr 30, 2008
Secretary of State

Entity Name: BREVARD HEALTH AND WELLNESS CENTER, LLC

Current Principal Place of Business:

7 ORANGE AVE
ROCKLEDGE, FL 32955

New Principal Place of Business:

9 ORANGE AVE
ROCKLEDGE, FL 32955

Current Mailing Address:

125 E. MERRITT ISLAND
SUITE 209, BOX 206
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-3774167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JERKINS, SUSAN
7 ORANGE AVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

JERKINS, SUSAN
9 ORANGE AVE
ROCKLEDGE, FL 32955 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: SUSAN JERKINS

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JERKINS, OSCAR
Address: 7 ORANGE AVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM () Delete
Name: JERKINS, SUSAN
Address: 7 ORANGE AVE
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES:

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

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

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: SUSAN JERKINS

MGRM

04/30/2008

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