2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086558

Entity Name: PREMIER HEALTH & WELLNESS, LLC

FILED May 04, 2005 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
3924 EDEN ROSE CIRCLE WEST TAMPA, FL 33634			3924 EDEN ROC CIRCLE WEST TAMPA, FL 33634	
Current Mailing Address:		New Maili	New Mailing Address:	
3924 EDEN ROSE CIRCLE WEST TAMPA, FL 33634			3924 EDEN ROC CIRCLE WEST TAMPA, FL 33634	
	966532 FEI Number Applied For() F h s. 607.193(2)(b), F.S., the limited liability compar Iress of Current Registered Agent:			
FLANDERS, DIANE 3924 EDEN ROSE CIRCLE WEST TAMPA, FL 33634 US		3924 EDEN	FLANDERS, DIANE 3924 EDEN ROC CIRCLE WEST TAMPA, FL 33634 US	
The above nam in the State of F		oose of changing i	ts registered office or registered agent, or both	
SIGNATURE:	DIANE FLANDERS		05/04/2005	
_	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MEMBERS:		ADDITIONS/0	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition FLANDERS, DIANE MRS. 3924 W. EDEN ROC CIRCLE TAMPA, FL 33634	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition FLANDERS, JAMES C MR. 3924 W. EDEN ROC CIRCLE TAMPA, FL 33634	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE FLANDERS PRES 05/04/2005