

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032950

FILED  
Jun 01, 2007  
Secretary of State

Entity Name: FLORIDA WISE MAGAZINE LLC

**Current Principal Place of Business:**

P.O. BOX 541600  
GREENACRES, FL 33454

**New Principal Place of Business:**

6706 COLUMBIA AVE  
LAKE WORTH, FL 33467

**Current Mailing Address:**

P.O. BOX 541600  
GREENACRES, FL 33454

**New Mailing Address:**

FEI Number: 20-2621546      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ANDERSON, DAWN  
Address: P.O. BOX 541600  
City-St-Zip: GREENACRES, FL 33454

Title: MGR ( ) Delete  
Name: ANDERSON, ANTHONY  
Address: P.O. BOX 541600  
City-St-Zip: GREENACRES, FL 33454

**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: ANTHONY ANDERSON

MGR

06/01/2007

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