

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043379

Entity Name: WELLNESS AUTHORS, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

4809 SW 91 TERRACE
GAINESVILLE, FL 32608

New Principal Place of Business:

281 SW 129TH TERRACE
NEWBERRY, FL 32669

Current Mailing Address:

4809 SW 91 TERRACE
GAINESVILLE, FL 32608

New Mailing Address:

281 SW 129TH TERRACE
NEWBERRY, FL 32669

FEI Number: 20-2743419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALISHMAN, STEVEN
4809 SW 91 TERRACE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

KALISHMAN, STEVEN
5055 SW 91ST TERRACE
GAINESVILLE, FL 32608 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:

04/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGMR () Change (X) Addition
Name: LEWIS, ADRIAN
Address: 281 SW 129TH TERRACE
City-St-Zip: NEWBERRY, FL 32608 US

Title: MGMR () Change (X) Addition
Name: KALISHMAN, STEVEN J
Address: 5055 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGMR () Change (X) Addition
Name: WATTS, DANIEL
Address: 4905 CLARK ROAD
City-St-Zip: SARASOTA, FL 34233 US

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: ADRIAN LEWIS

MGMR

04/29/2006

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