

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045524

FILED  
Jun 19, 2008  
Secretary of State

**Entity Name:** GREEN WAVE FAMILY WELLNESS CENTER, LLC

**Current Principal Place of Business:**

215 FOREST PARK CIRCLE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

215 FOREST PARK CIRCLE  
PANAMA CITY, FL 32405

**New Mailing Address:**

FEI Number: 20-2799185      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:**

CHAMBERLAIN, STEVEN M  
618 NE 1ST STREET  
GAINESVILLE, FL 32601      US

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

HOWELL & GOLDEN  
1122 FLORIDA AVE  
LYNN HAVEN, FL 32444      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: BENNETT D GOLDEN

06/19/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CLUXTON, J. CHARLES  
Address: 215 FOREST PARK CIRCLE  
City-St-Zip: PANAMA CITY, FL 32405

Title: MGR      ( ) Delete  
Name: CLUXTON, TALLIE C  
Address: 215 FOREST PARK CIRCLE  
City-St-Zip: PANAMA CITY, FL 32405

**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: BENNETT D GOLDEN

RA

06/19/2008

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