2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

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Entity Name: INTERNAL MEDICINE & PEDIATRICS WELLNESS CENTER, P.L.

Current Principal Place of Business:

934 N. SUNCOAST BLVD.
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

6038 W. NORDLING LOOP
CRYSTAL RIVER, FL 34429

Current Mailing Address:

934 N. SUNCOAST BLVD.
CRYSTAL RIVER, FL 34429

New Mailing Address:

6038 W. NORDLING LOOP
CRYSTAL RIVER, FL 34429

FEI Number: 20-3205463 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, CHARLES R
934 N SUNCOAST BLVD
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

WILSON, CHARLES R
6038 W. NORDLING LOOP
CRYSTAL RIVER, FL 34429 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: _____ 04/25/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MRGM
Name: WILSON, CARLENE A
Address: 6038 W. NORDLING LOOP
City-St-Zip: CRYSTAL RIVER, FL 34429

I hereby 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 Statues.

SIGNATURE: CHARLES WILSON MNGR 04/25/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date