

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091965

FILED
Jan 14, 2009
Secretary of State

Entity Name: WIDICK MEDICAL AESTHETICS, LLC

Current Principal Place of Business:

1400 US HIGHWAY 441, STE 954
THE VILLAGES, FL 321596813

New Principal Place of Business:

1400 US HIGHWAY 441 N
SUITE 954
THE VILLAGES, FL 321596813

Current Mailing Address:

1400 US HIGHWAY 441, STE 954
THE VILLAGES, FL 321596813

New Mailing Address:

1400 US HIGHWAY 441 N
SUITE 954
THE VILLAGES, FL 321596813

FEI Number: 32-0164981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WIDICK, TAMMY
33041 PROFESSIONAL DR., SUITE 102
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

WIDICK, TAMMY
1400 US HWY 441 N
SUITE 954
LEESBURG, FL 34748 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: TAMMY WIDICK

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WIDICK, TAMMY
Address: 33041 PROFESSIONAL DR., SUITE 102
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WIDICK, TAMMY
Address: 1400 US HWY 441 N, STE. 954
City-St-Zip: THE VILLAGES, FL 34748

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: TAMMY WIDICK

MGRM

01/14/2009

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