

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000006512

FILED
May 03, 2008
Secretary of State

Entity Name: NATURAL WELLNESS GROUP, LLC

Current Principal Place of Business:

2476 NE ELAINE STREET
JENSEN BEACH, FL 34957

New Principal Place of Business:

6877 SW 48TH AVE
PALM CITY, FL 34990

Current Mailing Address:

2336 SE OCEAN BLVD., #128
STUART, FL 34996

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SLANE, JILL
2819 NE SEWALL'S LANDING WAY
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

SLANE, JILL
6877 SW 48TH AVE
PALM CITY, FL 34990 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: JILL SLANE

05/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SLANE, JILL
Address: 2819 NE SEWALL'S LANDING WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM () Delete
Name: SLANE, RODNEY
Address: 2819 NE SEWALL'S LANDING WAY
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SLANE, JILL
Address: 6877 SW 48TH AVE
City-St-Zip: PALM CITY, FL 34990

Title: MGRM (X) Change () Addition
Name: SLANE, RODNEY
Address: 6877 SW 48TH AVE
City-St-Zip: PALM CITY, FL 34990

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: JILL NOONAN-SLANE

MS

05/03/2008

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