

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016805

FILED
Jan 28, 2008
Secretary of State

Entity Name: PRECISION WEIGHT LOSS, LLC

Current Principal Place of Business:

3850 TAMPA ROAD
102
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

3850 TAMPA ROAD
102
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 20-4310985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGIN, BRENT J MD
2107 OTTER WAY
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AGIN, BRENT J MD
Address: 2107 OTTERWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: MGR () Delete
Name: MCCORMICK, INA
Address: 7802 85TH LANE N
City-St-Zip: SEMINOLE, FL 33777

Title: MGR () Delete
Name: STOCKS, KATHY
Address: 501 WALKER ROAD
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DR. BRENT J. AGIN

MGR

01/28/2008

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