

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029900

FILED  
Jan 22, 2007  
Secretary of State

**Entity Name:** EXECUTIVE WELL-BEING SERVICES, LLC

**Current Principal Place of Business:**

1860 SPRINGTIME AVE  
CLEARWATER, FL 33755

**New Principal Place of Business:**

**Current Mailing Address:**

1860 SPRINGTIME AVE  
CLEARWATER, FL 33755

**New Mailing Address:**

**FEI Number:** 05-0634361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SUNDANCE, JENNIFER  
WILDER CENTER  
3000 GULF TO BAY BLVD.  
CLEARWATER, FL 33759 US

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

THE BIG GAME COMPANY  
1610 NORTH HERCULES AVE  
SUITE I  
CLEARWATER, FL 33765 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: JON SUPAK

01/22/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: REV. ( ) Change (X) Addition  
Name: SUNDANCE, JENNIFER W  
Address: 1860 SPRINGTIME AVE.  
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify for the 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: JENNIFER SUNDANCE

REV.

01/22/2007

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