

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000030586

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** WELLNESS CONCEPTS OF FLORIDA L.L.C.

**Current Principal Place of Business:**

9070 58TH DRIVE EAST  
STE 103  
BRADENTON, FL 34202 US

**New Principal Place of Business:**

9020 58TH DRIVE EAST  
STE 102  
BRADENTON, FL 34202 US

**Current Mailing Address:**

PO BOX 20247  
BRADENTON, FL 34204

**New Mailing Address:**

PO BOX 20247  
BRADENTON, FL 34204 US

**FEI Number:** 20-4549981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOTLARCZYK, GREGORY G  
9070 58TH DR E  
103  
BRADENTON, FL 34202 US

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

KOTLARCZYK, GREGORY G  
9020 58TH DR E  
102  
BRADENTON, FL 34202 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: GREGORY G KOTLARCZYK

04/19/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KOTLARCZYK, GREGORY G  
Address: PO BOX 20247  
City-St-Zip: BRADENTON, FL 34204 US

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 Statutes.

SIGNATURE: GREGORY G KOTLARCZYK

MGR

04/19/2010

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