

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000075899

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** WISDOM CAMP ECKERD, LLC

**Current Principal Place of Business:**

1625 N. COMMERCE PARKWAY  
SUITE 225  
WESTON, FL 33326

**New Principal Place of Business:**

1950 N. COMMERCE PARKWAY  
SUITE 5  
WESTON, FL 33326

**Current Mailing Address:**

1625 N. COMMERCE PARKWAY  
SUITE 225  
WESTON, FL 33326

**New Mailing Address:**

1950 N. COMMERCE PARKWAY  
SUITE 5  
WESTON, FL 33326

**FEI Number:** 20-5313350

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAPIRO, JAY S  
1625 N. COMMERCE PARKWAY  
SUITE 225  
WESTON, FL 33326 US

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

SHAPIRO, JAY S  
1950 N. COMMERCE PARKWAY  
SUITE 5  
WESTON, FL 33326 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:

04/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SHAPIRO, JAY S  
Address: 2422 POINCIANA COURT  
City-St-Zip: WESTON, FL 33327

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: JAY S SHAPIRO

MGR

04/28/2010

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