

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000078342

FILED
May 15, 2007
Secretary of State

Entity Name: GLOBAL WELLNESS ALLIANCE, LLC

Current Principal Place of Business:

2701 NORTH ROCKY POINT DRIVE
SUITE 1030
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2701 NORTH ROCKY POINT DRIVE
SUITE 1030
TAMPA, FL 33607

New Mailing Address:

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

Name and Address of New Registered Agent:

LATORRE, CHERYL L
2701 NORTH ROCKY POINT DRIVE
SUITE 1030
TAMPA, FL 33607 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: KITTELSTAD, RICHARD D
Address: 2701 NORTH ROCKY POINT DRIVE, STE 1030
City-St-Zip: TAMPA, FL 33607

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

Title: MGR () Delete
Name: JABLONSKI, PATRICK
Address: 2701 NORTH ROCKY POINT DRIVE, STE 1030
City-St-Zip: TAMPA, FL 33607

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

Title: MGR () Delete
Name: LATORRE, RANDALL C
Address: 2701 NORTH ROCKY POINT DRIVE, STE 1030
City-St-Zip: TAMPA, FL 33607

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

Title: MGR () Delete
Name: MCCONNELL, JEREMY
Address: 2701 NORTH ROCKY POINT DRIVE, STE 1030
City-St-Zip: TAMPA, FL 33607

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

Title: MGR () Delete
Name: KITTELSTAD, MERRILEE
Address: 2701 NORTH ROCKY POINT DRIVE, STE 1030
City-St-Zip: TAMPA, FL 33607

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: MERRILEE KITTELSTAD

MGR

05/15/2007

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