## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085854

172 SAUSALITO BLVD.

CASSELBERRY, FL 32707

Address:

City-St-Zip:

Entity Name: SEMINOLE WELLNESS & INJURY CENTER, LLC

FILED Feb 21, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	SALITO BLVD. BERRY, FL 327	707			
Current Mailing Address:			New Mailing Address:		
	SALITO BLVD. BERRY, FL 327	707			
FEI Numbe	er: 20-5634956	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
2220 HIL	DOMINIC G JR CREST AVE. OO, FL 32803	us			
	ve named entity ate of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both	
SIGNATU	JRE:				
Electronic Signature of Registered Age			ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name:	MGRM ( BOCCO, RICH	) Delete ARD J	Title: Name:	( ) Change ( ) Addition	

Address:

City-St-Zip:

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: RICHARD J. BOCCO MGRM 02/21/2007