2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 21, 2009
Secretary of State

DOCUMENT# L08000112241

Entity Name: NATURAL ENERGY WELLNESS SHOPPE, LLC

Current Principal Place of Business:

3830 MILFLOURES DR.
RUSKIN, FL 33573

New Principal Place of Business:

3830 MILFLORES DR.
RUSKIN, FL 33573

Current Mailing Address:

3830 MILFLOURES DR.
RUSKIN, FL 33573

New Mailing Address:

3830 MILFLORES DR.
RUSKIN, FL 33573

FEI Number: 26-3832852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

TURNER, BETTY JANE H
3830 MILFLOURES DR.
RUSKIN, FL 33573 US

Name and Address of New Registered Agent:

TURNER, BETTY JANE H
3830 MILFLORES DR.
RUSKIN, FL 33573 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: BETTY JANE 08/21/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: TURNER, BETTY JANE H
Address: 3830 MILFLOURES DR.
City-St-Zip: RUSKIN, FL 33573

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: TURNER, BETTY JANE H
Address: 3830 MILFLORES DR.
City-St-Zip: RUSKIN, FL 33573

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: BETTY JANE TURNER MNG 08/21/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date