

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000015390

Entity Name: LEGACY WELLNESS CLINICS LLC

FILED
May 01, 2010
Secretary of State

Current Principal Place of Business:

7096 VIA MARBELLA
BOCA RATON, FL 33433

New Principal Place of Business:

9200 N. THORNTON AVE
ORLANDO, FL 32803

Current Mailing Address:

7096 VIA MARBELLA
BOCA RATON, FL 33433

New Mailing Address:

PO BOX 540614
ORLANDO, FL 32854

FEI Number: 26-4468452 FEI Number Applied For () 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:

KRAMER, JR., JOHN E
7096 VIA MARBELLA
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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:

Title: MGR
Name: KRAMER JR., JOHN E
Address: 7096 VIA MARBELLA
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM
Name: WILSON, NANNETTE G
Address: 920 N. THORNTON AVENUE
City-St-Zip: ORLANDO, FL 32803

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: JOHN E KRAMER

MGR

05/01/2010

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