

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000027392

FILED
Jan 31, 2010
Secretary of State

Entity Name: WALLACE HEALTH AND WELLNESS ASSOCIATES, LLC

Current Principal Place of Business:

2732 NORTHRIDGE DR. EAST
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2732 NORTHRIDGE DR. EAST
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 32-0280539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, ROBERT W JR
2732 NORTHRIDGE DR. EAST
CLEARWATER, FL 33761 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: WALLACE, ROBERT W JR.
Address: 2732 NORTHRIDGE DR. EAST
City-St-Zip: CLEARWATER, FL 33761

Title: MGR
Name: WALLACE, MAUREEN
Address: 2732 NORTHRIDGE DR. EAST
City-St-Zip: CLEARWATER, FL 33761

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: ROBERT WALLACE

MGR

01/31/2010

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