2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# L09000038457

Entity Name: NATURAL LIFE MEDICINE, LLC

Current Principal Place of Business:

1215 WEST GARDEN STREET
PENSACOLA, FL 32502 US

New Principal Place of Business:

211 S. SUNSET BLVD
GULF BREEZE, FL 32561 US

Current Mailing Address:

P.O. BOX 843
GULF BREEZE, FL 32562 US

New Mailing Address:

FEI Number: 26-4486453 **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:

WILEY-KOCHEK, CAROLYN A CAROLYN
1215 WEST GARDEN STREET
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

WILEY-KOCHEK, CAROLYN A CAROLYN
211 S. SUNSET BLVD.
GULF BREEZE, FL 32561 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: 05/04/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CAROLYN WILEY-KOCHEK
Address: 211 S. SUNSET BLVD.
City-St-Zip: GULF BREEZE, FL 32561 US

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 Statues.

SIGNATURE: CAROLYN WILEY-KOCHEK MGR 05/04/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date