2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# L10000093379

Entity Name: WELLNESS HEALTH CENTER, LLC

Current Principal Place of Business:

60 SPRING VISTA DR.
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

PO BOX 740780
ORANGE CITY, FL 32774

New Mailing Address:

FEI Number: 27-3396774 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOLARO, VINCENT J
60 SPRING VISTA DR.
DEBARY, FL 32713 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: SCOLARO, VINCENT J
Address: 60 SPRING VISTA DR.
City-St-Zip: DEBARY, FL 32713

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: VINCENT SCOLARO MGR 01/05/2012

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