

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000100488

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** WELLNESS-EVOLUTION DIAGNOSTICS, LLC.

**Current Principal Place of Business:**

112 W. NEW YORK AVENUE  
DELAND, FL 32720

**New Principal Place of Business:**

112 W. NEW YORK AVENUE  
210C  
DELAND, FL 32720

**Current Mailing Address:**

112 W. NEW YORK AVENUE  
DELAND, FL 32720

**New Mailing Address:**

112 W. NEW YORK AVENUE  
210C  
DELAND, FL 32720

**FEI Number:** 27-3518338

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANIS, CAROL KEY  
1668 LAKE GEORGE ROAD  
SEVILLE, FL 32190 US

**Name and Address of New Registered Agent:**

HANIS, CAROL K  
1668 LAKE GEORGE ROAD  
SEVILLE, FL 32190 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: CAROL KAY HANIS

01/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: HANIS, CAROL K  
Address: 1668 LAKE GEORGE ROAD  
City-St-Zip: SEVILLE, FL 32190

Title: V  
Name: DEMARAY, AUBREY  
Address: 2101 SEAPORT CIRCLE #205  
City-St-Zip: WINTER PARK, FL 32792

Title: MGRM  
Name: YELVINGTON, DAWN  
Address: 360 BENNETT ROAD  
City-St-Zip: PIERSON, FL 32180

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: CAROL KAY HANIS

P

01/30/2012

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