

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000027559

FILED
Feb 12, 2012
Secretary of State

Entity Name: PARADISE WEIGHT LOSS CLINIC, LLC

Current Principal Place of Business:

1101 S. TAMIAMI TRAIL
SUITE 108
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

1101 S. TAMIAMI TRAIL
SUITE 108
VENICE, FL 34285 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILLER, SUE A
709 ARMADA RD. N
VENICE, FL 34285 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: MGRM
Name: MILLER, SUE A
Address: 1101 S TAMIAMI TRAIL, SUITE 108
City-St-Zip: VENICE, FL 34285 US

Title: MGRM
Name: MILLER, KEVIN J MD
Address: 1101 S TAMIAMI TRAIL, SUITE 108
City-St-Zip: VENICE, FL 34285 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 Statutes.

SIGNATURE: SUE MILLER

PRES

02/12/2012

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