

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000069077

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** WELLNESS HOLDINGS OF TAMPA BAY LLC

**Current Principal Place of Business:**

2910 W. KNIGHTTS AVE.  
TAMPA, FL 33611 US

**New Principal Place of Business:**

2711 W TRILBY AVE  
TAMPA, FL 33611 US

**Current Mailing Address:**

2910 W. KNIGHTTS AVE.  
TAMPA, FL 33611 US

**New Mailing Address:**

2711 W TRILBY AVE  
TAMPA, FL 33611 US

**FEI Number:** 45-2547065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FELDMAN, EDWARD  
2910 W. KNIGHTTS AVE  
TAMPA, FL 33611 US

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

FELDMAN, EDWARD  
2711 W TRILBY AVE  
TAMPA, FL 33611 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:

04/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FELDMAN, EDWARD  
Address: 2711 W TRILBY AVE  
City-St-Zip: TAMPA, FL 33611 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: EDWARD N. FELDMAN M. D.

MGR

04/19/2012

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