

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000117320

FILED
Apr 13, 2012
Secretary of State

Entity Name: PALM WELLNESS CENTER, LLC

Current Principal Place of Business:

13902 N DALE MABRY HWY
102
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

13902 N DALE MABRY HWY
102
TAMPA, FL 33618 US

New Mailing Address:

FEI Number: 45-3588355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMER, WILLIAM L II
13902 N DALE MABRY HWY
102
TAMPA, FL 33618 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: PALMER, WILLIAM L II
Address: 13902 N DALE MABRY HWY, SUITE 102
City-St-Zip: TAMPA, FL 33618 US

Title: MGR
Name: REYES, MICHEL
Address: 13902 N DALE MABRY HWY, SUITE 102
City-St-Zip: TAMPA, FL 33618 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: WILLIAM PALMER

OWNE

04/13/2012

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