

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000010691

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** LINEBAUGH WELLNESS CENTER INC

**Current Principal Place of Business:**

6940 W. LINEBAUGH AVE  
102  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

6940 W. LINEBAUGH AVE  
102  
TAMPA, FL 33625 US

**New Mailing Address:**

**FEI Number:** 27-1832765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOLEDO, BRYAN  
6940 W. LINEBAUGH AVE  
102  
TAMPA, FL 33625 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PALMER II, WILLIAM L  
Address: 6940 W. LINEBAUGH AVE STE 102  
City-St-Zip: TAMPA, FL 33625 US

Title: VP  
Name: TOLEDO, BRYAN  
Address: 6940 W. LINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33625 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM L PALMER

P

05/01/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date