



85 7th Place East, Suite 500
St. Paul, Minnesota 55101-3165
www.commerce.state.mn.us
651.296.4026 FAX 651.297.1959
An equal opportunity employer

September 14, 2010

ROB NEWBOLD
FRAN RITE
4347 PORTAGE STREET NW SUITE 102
NORTH CANTON, OH 44720

Re: F-5849
PHYSICIANS WEIGHT LOSS CENTERS OF AMERICA INC
PHYSICIANS WEIGHT LOSS CENTERS F/A

Dear Mr. Newbold:

The Annual Report has been reviewed and is in compliance with Minnesota Statute Chapter 80C and Minnesota Rules Chapter 2860.

This means that there continues to be an effective registration statement on file and that the franchisor may offer and sell the above-referenced franchise in Minnesota.

The franchisor is not required to escrow franchise fees, post a Franchise Surety Bond or defer receipt of franchise fees during this registration period.

As a reminder, the next annual report is due within 120 days after the franchisor's fiscal year end, which is December 31, 2010.

Sincerely,

GLENN WILSON
Commissioner

By:

Daniel Sexton
Commerce Analyst Supervisor
Registration Division
(651) 296-4520

GW:DES:dlw

F-5849

STATE OF MINNESOTA
DEPARTMENT OF COMMERCE
REGISTRATION DIVISION
(651) 296-6328

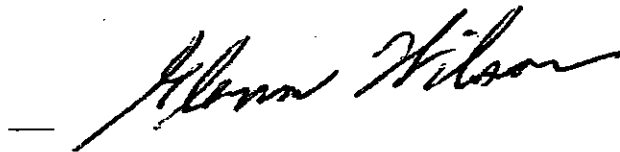
IN THE MATTER OF THE REGISTRATION OF:
PHYSICIANS WEIGHT LOSS CENTERS F/A

By PHYSICIANS WEIGHT LOSS CENTERS OF AMERICA INC

ORDER AMENDING
REGISTRATION

WHEREAS, an application to amend the registration and amendment fee have been filed,

IT IS HEREBY ORDERED that the registration dated November 16, 2009, is amended as of the date set forth below.



GLENN WILSON
Commissioner
Department of Commerce
85 7th Place East, Suite 500
St Paul, MN 55101

Date: September 14, 2010

FRANCHISE DISCLOSURE DOCUMENT REGISTRATION APPLICATION

File No.: _____

State: MinnesotaF-
5849State of Minnesota
Dept. of Commerce

AUG 04 2010

Rec'd BCWFee: \$300.00

Application for (check only one):

 INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES RENEWAL APPLICATION OR ANNUAL REPORT PRE-EFFECTIVE AMENDMENT POST-EFFECTIVE MATERIAL AMENDMENT

1. Full legal name of Franchisor:

Physicians Weight Loss Centers of America, Inc.

2. Name of the franchise offering:

Physicians Weight Loss Centers

3. Franchisor's principal business address:

395 Springside Drive
Akron, Ohio 44333

4. Name and address of Franchisor's agent in this State authorized to receive service of process:

Commissioner of Commerce
State of Minnesota
85 7th Place East, Suite 500
St. Paul, MN 55101-2198

5. The states in which this application is or will be shortly on file:

New York, Florida, Michigan, Virginia, Washington

9-14-10

AJR
12/31
Ames
11-16-09

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