

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024486

FILED  
Mar 11, 2006  
Secretary of State

**Entity Name:** CUSTOM THERAPY CONNECTION, LLC

**Current Principal Place of Business:**

2715 DATURA STREET  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

2715 DATURA STREET  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ()

**Certificate of Status Desired** ( )

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

REGAR, JENNIFER  
2715 DATURA STREET  
SARASOTA, FL 34239 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 ( ) Delete  
Name: REGAR, JENNIFER  
Address: 2715 DATURA STREET  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: JENNIFER REGAR

MGRM

03/11/2006

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