

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741053

FILED
Apr 10, 2009
Secretary of State

Entity Name: LIFE BALANCING CENTER, INC.

Current Principal Place of Business:

1950 SANDRA DRIVE
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

1950 SANDRA DRIVE
CLEARWATER, FL 33764 US

New Mailing Address:

FEI Number: 59-1858927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REUTER, PETER
1950 SANDRA DRIVE
CLEARWATER, FL 337644772 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: D () Delete
Name: NELSON, STEVEN P.DC DR
Address: 7316 CENTRAL AVE
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: PD () Delete
Name: REUTER, PETER
Address: 1950 SANDRA DR
City-St-Zip: CLEARWATER, FL 33764

Title: TD () Delete
Name: ECHELMAN, SUSAN
Address: 10333 TARRAGOW DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: WUNDERLICH RAY C., JR.MD
Address: 8821 MLK ST- N
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D () Delete
Name: SNYDER, MARK
Address: 726 N. HIGHLAND AVE
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER REUTER

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date