## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000749

Address:

City-St-Zip:

PO BOX 7008

TAMPA, FL 33673

Entity Name: MAGDALENE CENTER OF TAMPA, LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4008 N FLO TAMPA, FI	ORIDA AVE _ 33603				
Current Mailing Address:			New Mailing Address:		
PO BOX 70 TAMPA, FI					
FEI Number:	59-3726433	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	JRES, INC. ORIDA AVE _ 33603 US	3			
	named entity see of Florida.	submits this statement for the բ	ourpose of changing its registered	d office or registered agent, or both	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name:	. ,	) Delete NVESTOR GROUP LLC	Title: Name:	( ) Change ( ) Addition	

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 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: DHARMA MALEMPATI MGRM 04/15/2009