2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# L01000003322

Entity Name: BETTER BODY PHYSICAL THERAPY, L.L.C.

Current Principal Place of Business:

821 NE 36TH TERRACE, #8
OCALA, FL 34470

New Principal Place of Business:

821 NE 36TH TERRACE
SUITE #8
OCALA, FL 34470

Current Mailing Address:

821 NE 36TH TERRACE, #8
OCALA, FL 34470

New Mailing Address:

9401 SW SR 200
BLDG 2000, SUITE 2001
OCALA, FL 34481

FEI Number: 59-3705510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEORGE, LISA D
821 NE 36TH TERRACE, #8
OCALA, FL 34470 US

Name and Address of New Registered Agent:

GEORGE, LISA D
821 NE 36TH TERRACE
SUITE #8
OCALA, FL 34470 US

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: LISA D. GEORGE 04/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GEORGE, LISA D
Address: 821 NE 36TH TERRACE, #8
City-St-Zip: OCALA, FL 34470

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 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: LISA D. GEORGE MGR 04/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date