2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# L02000030969

Entity Name: DEHCOL MANAGEMENT, LLC

Current Principal Place of Business:

17900 NW 5TH STREET, SUITE 103
PEMBROKE PINES, FL 33029

New Principal Place of Business:

17900 NW 5TH STREET,
SUITE 103
PEMBROKE PINES, FL 33029

Current Mailing Address:

17900 NW 5TH STREET, SUITE 103
PEMBROKE PINES, FL 33029

New Mailing Address:

17900 NW 5TH STREET,
SUITE 103
PEMBROKE PINES, FL 33029

FEI Number: 57-1145574 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANKLIN, DEHLIA
4761 SW 126 AVE.
SOUTHWEST RANCHES, FL 33330 US

Name and Address of New Registered Agent:

FRANKLIN, DEHLIA E DR
4761 SW 126 AVE.
SOUTHWEST RANCHES, FL 33330 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: DRFRANKLIN@INTERNATIONALTHERAPY.COM 04/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: FRANKLIN, DEHLIA
Address: 4761 SW 126 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FRANKLIN, DEHLIA E DR
Address: 4761 SW 126 AVE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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: DRFRANKLIN@INTERNATIONALTHERAPY.COM MGR 04/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date