

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021366

FILED
Jul 15, 2007
Secretary of State

Entity Name: KIDS ABOARD THERAPY LLC

Current Principal Place of Business:

9841 NW 2ND STREET
PLANTATION, FL 33324

New Principal Place of Business:

8672 BLAZE CT
DAVIE, FL 33328

Current Mailing Address:

9841 NW 2ND STREET
PLANTATION, FL 33324

New Mailing Address:

8672 BLAZE CT
DAVIE, FL 33328

FEI Number: 20-0074597 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

POSNER, CHAYA G
9841 NW 2ND STREET
PLANTATION, FL US

Name and Address of New Registered Agent:

POSNER, CHAYA G
8672 BLAZE CT
DAVIE, FL 33328 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: _____

07/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POSNER, CHAYA G
Address: 9841 NW 2ND STREET
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POSNER, CHAYA G
Address: 8672 BLAZE CT
City-St-Zip: DAVIE, FL 33328

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: CHAYA G POSNER

OTR

07/15/2007

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