

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024243

FILED  
May 04, 2009  
Secretary of State

Entity Name: INNER BALANCE BODYWORK L.L.C.

**Current Principal Place of Business:**

1315 KENTUCKY AVE  
SAINT CLOUD, FL 34769 US

**New Principal Place of Business:**

802 DORI CT  
SAINT CLOUD, FL 34772 US

**Current Mailing Address:**

1315 KENTUCKY AVE  
SAINT CLOUD, FL 34769 US

**New Mailing Address:**

802 DORI CT  
SAINT CLOUD, FL 34772 US

FEI Number: 43-2022423      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:**

HARPER, TARA C  
1031 GEORGIA AVE  
SAINT CLOUD, FL 34769 US

**Name and Address of New Registered Agent:**

HARPER, TARA C  
802 DORI CT  
SAINT CLOUD, FL 34772 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:

05/04/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HARPER, TARA C  
Address: 802 DORI CT  
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: MGRM ( ) Delete  
Name: BROWN, KAREN F  
Address: 1031 GEORGIA AVE  
City-St-Zip: SAINT CLOUD, FL 34769 US

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: HARPER, TARA  
Address: 802 DORI CT  
City-St-Zip: SAINT CLOUD, FL 34772 US

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: TARA HARPER

MGRM

05/04/2009

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