2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2007
Secretary of State

DOCUMENT# L03000026579

Entity Name: DR. C'S TOTAL LIVING, LLC

Current Principal Place of Business:

5362 CENTRAL FLORIDA PKWY.
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

5362 CENTRAL FLORIDA PKWY.
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 90-0099647 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYNCH, CARMEN M
5362 CENTRAL FL PKWY.
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LYNCH, CARMEN M
Address: 5362 CENTRAL FLORIDA PKWY.
City-St-Zip: ORLANDO, FL 32821 US

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 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: CARMEN M LYNCH MGR 02/10/2007

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