

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041851

FILED
May 09, 2011
Secretary of State

Entity Name: WORKPLACE ASSISTANCE PROGRAM LLC

Current Principal Place of Business:

2151 45TH STREET
SUITE 202
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

4537 ARTESA WAY S.
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 55-0854576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, KATHLEEN T
4537 ARTESA WAY S
PALM BEACH GARDENS, FL 33418 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
Name: WEAVER, KATHLEEN T
Address: 4537 ARTESA WAY S
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM
Name: ROBINSON, DIANNE R
Address: 5 BIRCHWOOD ROAD
City-St-Zip: RANDOLPH, NJ 07869

I hereby 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: KATHLEEN T. WEAVER

MM

05/09/2011

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