

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017689

FILED
Apr 29, 2008
Secretary of State

Entity Name: HEALING CENTRE, L.L.C.

Current Principal Place of Business:

515 SOUTH WASHINGTON BOULEVARD
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

515 SOUTH WASHINGTON BOULEVARD
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-1127283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALTSAS, HARVEY
515 SOUTH WASHINGTON BOULEVARD
SARASOTA, FL 34236 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: KALTSAS, HARVEY
Address: 515 SOUTH WASHINGTON BOULEVARD
City-St-Zip: SARASOTA, FL 34236

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 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: HARVEY KALTSAS

MGR

04/29/2008

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