

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070591

Entity Name: TOTAL BODY CONCEPTS LLC

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

19254 PINE BLUFF CT
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

4300 KINGS HIGHWAY
SUITE #409
PORT CHARLOTTE, FL 33980

Current Mailing Address:

19254 PINE BLUFF CT
PORT CHARLOTTE, FL 33948

New Mailing Address:

4300 KINGS HIGHWAY
SUITE #409
PORT CHARLOTTE, FL 33980

FEI Number: 20-1764855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHRENS, WILLIAM M
19254 PINE BLUFF CT
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

AHRENS, WILLIAM M
4300 KINGS HIGHWAY
SUITE #409
PORT CHARLOTTE, FL 33948 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:

01/05/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: AHRENS, WILLIAM M
Address: 19254 PINE BLUFF
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AHRENS, WILLIAM M
Address: 4300 KINGS HIGHWAY #409
City-St-Zip: PORT CHARLOTTE, FL 33980

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM M AHRENS

MGR

01/05/2005

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