

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088670

Entity Name: ENDORPHIN PRACTICES LLC

FILED
Mar 15, 2006
Secretary of State

Current Principal Place of Business:

27595 LIME ST
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

27595 LIME ST
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 42-1662437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMPSEY, TIMOTHY O
13845 RIVERFOREST DR.
FORT MYERS, FL 33905 US

Name and Address of New Registered Agent:

DEMPSEY, TIMOTHY O
9200 HIGHLAND WOODS BLVD.
#1207
BONITA SPRINGS, FL 34135 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:

03/15/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DEMPSEY, TIMOTHY O
Address: 13845 RIVERFOREST DRIVE
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DEMPSEY, TIMOTHY O
Address: 9200 HIGHLANDWOODS BLVD
City-St-Zip: BONITA SPRINGS, FL 33905

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: TIMOTHY O DEMPSEY

MGR.

03/15/2006

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