

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000034858

**FILED**  
**Feb 27, 2011**  
**Secretary of State**

**Entity Name:** LORI CURTIS, RN, LMT, LLC

**Current Principal Place of Business:**

805 DOUGLAS AVENUE  
SUITE 159  
ALTAMONTE SPRINGS, FL 327142008 US

**New Principal Place of Business:**

805 DOUGLAS AVENUE  
SUITE 159-D  
ALTAMONTE SPRINGS, FL 327142008 US

**Current Mailing Address:**

805 DOUGLAS AVENUE  
SUITE 159  
ALTAMONTE SPRINGS, FL 327142008 US

**New Mailing Address:**

805 DOUGLAS AVENUE  
SUITE 159-D  
ALTAMONTE SPRINGS, FL 327142008 US

**FEI Number:** 20-2651268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CURTIS, LORI J  
805 DOUGLAS AVENUE  
SUITE 159  
ALTAMONTE SPRINGS, FL 327142008 US

**Name and Address of New Registered Agent:**

CURTIS, LORI J  
805 DOUGLAS AVENUE  
SUITE 159-D  
ALTAMONTE SPRINGS, FL 327142008 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:

02/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CURTIS, LORI J  
Address: 13675 GLYNSHEL DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787 US

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: LORI J CURTIS RN, LMT

MGRM

02/27/2011

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