

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000038397

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** LITTLE BIG STEPS THERAPY SERVICES, LLC

**Current Principal Place of Business:**

2128 SHADYHILL TERR  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 537  
GOLDENROD, FL 32733

**New Mailing Address:**

**FEI Number:** 20-2824991

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KELLIE E. TOMEO, P.A.  
KELLIE E. TOMEO, ESQ  
300 N RONALD REAGAN BLVD SUITE 307  
LONGWOOD, FL 32750 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:** MS  
**Name:** CURET-BURGOS, BEATRIZ PRESIDE  
**Address:** 2128 SHADYHILL TERRACE  
**City-St-Zip:** WINTER PARK, FL 32792

**Title:** MR  
**Name:** BURGOS, PABLO J VICE-PR  
**Address:** 2128 SHADYHILL TERRACE  
**City-St-Zip:** WINTER PARK, FL 32792

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:** BEATRIZ CURET-BURGOS

MS

04/10/2010

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