2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2007
Secretary of State

DOCUMENT# L05000046701

Entity Name: WHOLE CHILD CONSULTING, LLC

Current Principal Place of Business:

3853 E. RIVERSIDE DR
DUNNELLON, FL 34434

New Principal Place of Business:

Current Mailing Address:

3853 E. RIVERSIDE DR
DUNNELLON, FL 34434

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WARD, STEVE MA BCBA
3853 E. RIVERSIDE DR
DUNNELLON, FL 34434 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: WARD, STEVE
Address: 3853 E. RIVERSIDE DR
City-St-Zip: DUNNELLON, FL 34434

Title: MGRM ( ) Delete
Name: GRIMES, TERESA
Address: 3853 E. RIVERSIDE DR
City-St-Zip: DUNNELLON, FL 34434

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: WARD, STEVE J MA,BCBA
Address: 3853 E. RIVERSIDE DR
City-St-Zip: DUNNELLON, FL 34434

Title: MGRM (X) Change ( ) Addition
Name: GRIMES, TERESA A MS,BCBA
Address: 3853 E. RIVERSIDE DR
City-St-Zip: DUNNELLON, FL 34434

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: STEVE WARD, MA, BCBA MGR 06/30/2007

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