2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# L05000071739

Entity Name: COMPLETE RECOVERY, LLC

Current Principal Place of Business:

651 DON BISHOP ROAD
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

11490 EMERALD COAST PKWY
STE 300
MIRAMAR BEACH, FL 32550

Current Mailing Address:

651 DON BISHOP ROAD
SANTA ROSA BEACH, FL 32459

New Mailing Address:

11490 EMERALD COAST PKWY
STE 300
MIRAMAR BEACH, FL 32550

FEI Number: 20-3178887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILKS, DIANE
651 DON BISHOP ROAD
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

WILKS, DIANE
11490 EMERALD CST PKWY
STE 300
MIRAMAR BEACH, FL 32550 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: 04/22/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DAVIS, M C
Address: 651 DON BISHOP ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DAVIS, M C
Address: 11490 EMERALD COAST PKY, STE 300
City-St-Zip: MIRAMAR BEACH, FL 32550

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: MC DAVIS MGRM 04/22/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date