

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000012505

**FILED**  
**Jun 07, 2010**  
**Secretary of State**

**Entity Name:** ANANDA CENTER FOR YOGA & MASSAGE LLC

**Current Principal Place of Business:**

16 E JOINER  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 770502  
WINTER GARDEN, FL 34777

**New Mailing Address:**

**FEI Number:** 83-0449671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASH, RAMONA  
13348 HARBOR SHORE LN  
WINTER GARDEN, FL 34787 US

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

CRABTREE-FALKNER, RAMONA  
2119 BRANCASTER CIRCLE  
OCOE, FL 34761 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: RAMONA CRABTREE-FALKNER

06/07/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CRABTREE-FALKNER, RAMONA  
Address: 2119 BRANCASTER CIRCLE  
City-St-Zip: OCOEE, FL 34761

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: RAMONA CRABTREE-FALKNER

MGRM

06/07/2010

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