

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077468

Entity Name: LIGHTHOUSE THERAPY ASSOCIATES, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

151 EAST WASHINGTON STREET STE 421
ORLANDO, FL 32801

New Principal Place of Business:

13712 AMELIA POND DRIVE
WINTER GARDEN, FL 34786

Current Mailing Address:

PO BOX 784341
WINTER GARDEN, FL 34778

New Mailing Address:

FEI Number: 22-3939853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA PA
1840 SOUTHWEST 22 STREET 4TH FLOOR
MIAMI, FL 33145 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: MGRS () Delete
Name: SOBRAL, ELIANA C
Address: PO BOX 784341
City-St-Zip: WINTER GARDEN, FL 34778

ADDITIONS/CHANGES:

Title: MGRT () Delete
Name: SOBRAL, THIAGO C
Address: PO BOX 784341
City-St-Zip: WINTER GARDEN, FL 34778

Title: () Change () Addition
Name:
Address:
City-St-Zip:

() Change () Addition

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: ELIANA SOBRAL

MGRS

03/20/2009

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