

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102943

FILED
Aug 01, 2007
Secretary of State

Entity Name: CENTER FOR ACUPUNCTURE & INTEGRATIVE MEDICINE, LLC

Current Principal Place of Business:

759 46TH SQUARE
VERO BEACH, FL 32968

New Principal Place of Business:

2050 40TH AVE
SUITE 2
VERO BEACH, FL 32960

Current Mailing Address:

759 46TH SQUARE
VERO BEACH, FL 32968

New Mailing Address:

2050 40TH AVE
SUITE 2
VERO BEACH, FL 32960

FEI Number: 20-5762476 FEI Number Applied For () FEI Number Not Applicable () 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:

KING, ANGELA L AP
795 46TH SQUARE
VERO BEACH, FL 32968 US

Name and Address of New Registered Agent:

KING, ANGELA L AP
759 46TH SQUARE
VERO BEACH, FL 32968 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:

08/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MS. () Change (X) Addition
Name: KING, ANGELA L AP
Address: 759 46TH SQ
City-St-Zip: VERO BEACH, FL 32968

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: ANGELA L. KING, AP

MGRM

08/01/2007

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