2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# L06000110489

Entity Name: EQUILIBRIUM COUNSELING SERVICES, LLC

Current Principal Place of Business:

729 N THORNTON AVENUE
ORLANDO, FL 32803

New Principal Place of Business:

515 N. FERNCREEK AVENUE
ORLANDO, FL 32803

Current Mailing Address:

729 N THORNTON AVENUE
ORLANDO, FL 32803

New Mailing Address:

515 N. FERNCREEK AVENUE
ORLANDO, FL 32803

FEI Number: 36-4597319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHELPS, SUSAN T
729 N THORNTON AVENUE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

PHELPS, SUSAN T
515 N. FERNCREEK AVENUE
ORLANDO, FL 32803 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: 04/13/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PHELPS, SUSAN
Address: 729 N THORNTON AVENUE
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PHELPS, SUSAN
Address: 515 N. FERNCREEK AVENUE
City-St-Zip: ORLANDO, FL 32803

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: SUSAN T. PHELPS MM 04/13/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date