

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122347

FILED
Apr 26, 2008
Secretary of State

Entity Name: KIDS FIRST OCCUPATIONAL THERAPY, LLC

Current Principal Place of Business:

3211 NW 87TH AVENUE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

3780 NW 5TH AVE
OAKLAND PARK, FL 33309

Current Mailing Address:

3211 NW 87TH AVENUE
CORAL SPRINGS, FL 33065

New Mailing Address:

3780 NW 5TH AVE
OAKLAND PARK, FL 33309

FEI Number: 35-2286109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HENRICKSEN, LORI A
3211 NW 87TH AVE
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

HENRICKSEN, LORI A
3780 NW 5TH AVE
OAKLAND PARK, FL 33309 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: LORI A HENRICKSEN

04/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HENRICKSEN, LORI A
Address: 3211 NW 87TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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

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: LORI A HENRICKSEN

MGRM

04/26/2008

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