

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038392

FILED
Jul 22, 2008
Secretary of State

Entity Name: TOTAL HEALTH CLINIC, LLC.

Current Principal Place of Business:

13947 BEACH BLVD #202
JACKSONVILLE
TAMPA, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

13947 BEACH BLVD #202
JACKSONVILLE
TAMPA, FL 32224 US

New Mailing Address:

FEI Number: 20-8808622 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:

CARLSON, JEREMIAH
13319A THOMASVILLE CIRCLE
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

CARLSON, JEREMIAH
11120 TIVERTON CT.
JACKSONVILLE, FL 32246 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: JEREMIAH W. CARLSON

07/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CARLSON, JEREMIAH
Address: 13319A THOMASVILLE CIRCLE
City-St-Zip: TAMPA, FL 33617 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CARLSON, JEREMIAH W DR.
Address: 11120 TIVERTON CT.
City-St-Zip: JACKSONVILLE, FL 32246 US

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: JEREMIAH W. CARLSON

DR,

07/22/2008

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