

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000069549

FILED
Apr 11, 2010
Secretary of State

Entity Name: INTEGRATIVE THERAPY CENTER FOR SPEECH LANGUAGE & LEARNING LLC

Current Principal Place of Business:

169 TEQUESTA DR.
SUTIE 11E
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

169 TEQUESTA DR.
SUTIE 11E
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 26-0463617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCINTRYE, SHANNON
169 TEQUESTA DR
SUITE 11E
TEQUESTA, FL 33469 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: MGR
Name: MCINTYRE, SHANNON
Address: 169 TEQUESTA DR., SUITE 11E
City-St-Zip: TEQUESTA, FL 33469 US

Title: MGR
Name: ECKHARDT, REMAI
Address: 169 TEQUESTA DR., SUITE 11E
City-St-Zip: TEQUESTA, FL 33469 US

I hereby 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: SHANNON MCINTYRE

MNG

04/11/2010

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