2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2010
Secretary of State

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Entity Name: CHILDREN'S AUTISM TREATMENT SPECIALISTS, LLC.

Current Principal Place of Business:

18070 S. TAMIAMI TRAIL
UNIT 16
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

18070 S. TAMIAMI TRAIL
UNIT 16
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 51-0645680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'SULLIVAN, LAURA P
18070 S. TAMIAMI TRAIL
UNIT 16
FORT MYERS, FL 33908 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: O'SULLIVAN, DR LAURA P
Address: 1052 WHISPERWOOD WAY
City-St-Zip: SANIBEL, FL 33957

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 Statues.

SIGNATURE: LAURA P. O'SULLIVAN MGR. 01/05/2010

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