2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000080962

Entity Name: LYNN WAPPLER, M.S., LMHC, LLC

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5121 EHRLICH ROAD, STE. 112A 5121 EHRLICH ROAD, STE. 104 B TAMPA, FL 33624

TAMPA, FL 33624

Current Mailing Address: New Mailing Address:

5121 EHRLICH ROAD, STE. 112A 5121 EHRLICH ROAD, STE. 104 B

TAMPA, FL 33624 TAMPA, FL 33624

FEI Number: 26-3157853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WAPPLER, LYNN WAPPLER, LYNN 5121 EHRLICH ROAD, STE. 112A 5121 EHRLICH ROAD, STE. 104 B TAMPA, FL 33624 TAMPA, FL 33624

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: 02/11/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change () Addition

WAPPLER, LYNN Name: Name: Address: 5121 EHRLICH RD. STE. 104 B Address: City-St-Zip: TAMPA, FL 33624 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: LYNN WAPPLER 02/11/2009