

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083739

Entity Name: HIGHER HEALING, LLC

FILED
Apr 04, 2008
Secretary of State

Current Principal Place of Business:

703 VISION TERRACE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

3804 BURNS ROAD
SUITE A
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

703 VISION TERRACE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

3804 BURNS ROAD
SUITE A
PALM BEACH GARDENS, FL 33410

FEI Number: 26-0781796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, DEBORAH
703 VISION TERRACE
PALM BEACH GARDENS, FL 33418 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: MGRM () Delete
Name: KATZ, DEBORAH
Address: 703 VISION TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM () Delete
Name: WOLMES, BARBARA ANN DR.
Address: 134 EAST HAMPTON WAY
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: WILMES, BARBARA ANN DR.
Address: 134 EAST HAMPTON WAY
City-St-Zip: JUPITER, FL 33458

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: DEBORAH KATZ

MGRM

04/04/2008

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