

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084389

FILED  
Sep 17, 2008  
Secretary of State

**Entity Name:** INTEGRAL HEALTH CONCEPTS, LLC

**Current Principal Place of Business:**

PMB 312, 2200 WINTER SPRINGS BLVD.  
SUITE 106  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 312, 2200 WINTER SPRINGS BLVD.  
SUITE 106  
OVIEDO, FL 32765 US

**New Mailing Address:**

**FEI Number:** 26-0732416

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GIROUX, KATHRYN S  
702 OVERLOOK WAY  
WINTER SPRINGS, FL 32708 US

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

BOYD, STEPHANIE L  
PMB 312, 2200 WINTER SPRINGS BLVD.  
SUITE 106  
OVIEDO, FL 32765 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: STEPHANIE L. BOYD

09/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GIROUX, KATHRYN S  
Address: PMB 312, 2200 WINTER SPRINGS BLVD.,STE106  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM ( ) Delete  
Name: BOYD, STEPHANIE L  
Address: PMB 312, 2200 WINTER SPRINGS BLVD.,STE106  
City-St-Zip: OVIEDO, FL 32765 US

**ADDITIONS/CHANGES:**

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: STEPHANIE L. BOYD

MGRM

09/17/2008

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