2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000096086

Entity Name: WINTER PARK NUTRITION THERAPY L.L.C.

FILED Mar 08, 2008 Secretary of State

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

2431 ALOMA AVENUE, STE. 160 820 N THISTLE LANE

WINTER PARK, FL 32792 MAITLAND, FL 32751 US

Current Mailing Address: New Mailing Address:

2431 ALOMA AVENUE, STE. 160
WINTER PARK, FL 32792
820 N THISTLE LANE
MAITLAND, FL 32751 US

FEI Number: 26-1247241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EDWARDS, KIMBERLY F
2431 ALOMA AVENUE, STE. 160
WINTER PARK, FL 32792
US

EDWARDS, KIMBERLY F
820 N THISTLE LANE
MAITLAND, FL 32751
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: KIMBERLY F EDWARDS 03/08/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 EDWARDS, KIMBERLY F
 Name:
 EDWARDS, KIMBERLY F

 Address:
 2431 ALOMA AVENUE, STE. 160
 Address:
 820 N THISTLE LANE

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 MAITLAND, FL 32751 US

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: KIMBERLY F. EDWARDS MGR 03/08/2008