

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000115905

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** LIFE FORCE CONSULTING GROUP OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

2595 ANACONDA TR.  
MAITLAND, FL 32751

**New Principal Place of Business:**

2127 LAKE BALDWIN LANE  
#102  
ORLANDO, FL 32814 UN

**Current Mailing Address:**

2595 ANACONDA TR.  
MAITLAND, FL 32751

**New Mailing Address:**

2127 LAKE BALDWIN LANE  
#102  
ORLANDO, FL 32814 UN

**FEI Number:** 74-3240725

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, CRYSTOFER J  
2595 ANACONDA TR  
MAITLAND, FL 32751 US

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

ROBERTS, CRYSTOFER J  
2127 LAKE BALDWIN LANE  
#102  
ORLANDO, FL 32814 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: CRYSTOFER J. ROBERTS

03/03/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBERTS, CRYSTOFER J  
Address: 2127 LAKE BALDWIN LANE #102  
City-St-Zip: ORLANDO, FL 32814 UN

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 Statutes.

SIGNATURE: CRYSTOFER J ROBERTS

MGRM

03/03/2011

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