

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000119214

FILED
Apr 23, 2008
Secretary of State

Entity Name: BALANCED CONCEPTS IN HEALTH, LLC

Current Principal Place of Business:

7999 PHILIPS HWY #206
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7999 PHILIPS HWY #206
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: ☐ **FEI Number Applied For ()** ☐ **FEI Number Not Applicable (X)** ☒ **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER, MCCORMICK & GREENE
50 NORTH LAURA STREET STE 2750
JACKSONVILLE, FL 32202 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: BOORAS, CHRISTINE M
Address: 7999 PHILIPS HWY. #206
City-St-Zip: JACKSONVILLE, FL 32256

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: CHRISTINE BOORAS

MGR

04/23/2008

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