

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000004482

FILED
Apr 20, 2009
Secretary of State

Entity Name: REJUVENATION MEDISPA AT WATERFORD LAKES, LLC

Current Principal Place of Business:

12780 WATERFORD LAKES PARKWAY
SUITE 100
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

12780 WATERFORD LAKES PARKWAY
SUITE 100
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 07-0711531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAIRES & HAMMOND, P.L.
283 CRANES ROOST BLVD.
ALTAMONTE SPRINGS, FL 32701 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: HAUGHTON-GREEN, ALLISON M.D.
Address: 12780 WATERFORD LAKES PARKWAY, STE. 100
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

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: ALLISON HAUGHTON-GREEN

DR

04/20/2009

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