

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000030632

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA BIOFEEDBACK LLC

**Current Principal Place of Business:**

1806 TOWN PLAZA COURT  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

3318 BUFFAM PL  
CASSELBERRY, FL 32707

**New Mailing Address:**

3318 BUFFAM PLACE  
CASSELBERRY, FL 32707

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

LADD, KELLY JOY  
815 CONTRAVEST LANE  
WINTER SPRINGS, FL 32708 US

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

LADD, KELLY JOY  
3318 BUFFAM PL  
CASSELBERRY, FL 32707 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/06/2010

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SANCHEZ, ALEJANDRO A  
Address: 3318 BUFFAM PL  
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM  
Name: LADD, KELLY JOY  
Address: 3318 BUFFAM PLACE  
City-St-Zip: CASSELBERRY, FL 32707

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: ALEJANDRO SANCHEZ

MGR

01/06/2010

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