

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000030632

**FILED**  
**Feb 17, 2011**  
**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 PLACE  
CASSELBERRY, FL 32707

**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:**

LADD, KELLY JOY  
3318 BUFFAM PL  
CASSELBERRY, FL 32707 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:** 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

02/17/2011

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