2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# L08000041097

Entity Name: LOURDES THERAPY SERVICES, LLC

Current Principal Place of Business:

225 MCKINLEY AVE.
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

225 MCKINLEY AVE.
COCOA BEACH, FL 32931

New Mailing Address:

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

Name and Address of Current Registered Agent:

SAVAGE, LOURDES
225 MCKINLEY AVE.
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

DOCUMENT SERVICES & FORMS LLC
1801 E. COLONIAL DRIVE
SUITE 106
ORLANDO, FL 32803 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: MARIA C. ORELLANA 04/16/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SAVAGE, LOURDES
Address: 225 MCKINLEY AVE.
City-St-Zip: COCOA BEACH, FL 32931

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: LOURDES SAVAGE MGRM 04/16/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date