2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L08000048164

Entity Name: IDEAL LIFE HYPNOSIS CENTER, LLC

Current Principal Place of Business:

2101 VISTA PARKWAY STE 126
WEST PALM BEACH, FL 33411

New Principal Place of Business:

195 W. BLUE SPRINGS AVE.
ORANGE CITY, FL 32763

Current Mailing Address:

2101 VISTA PARKWAY STE 126
WEST PALM BEACH, FL 33411

New Mailing Address:

195 W. BLUE SPRINGS AVE.
ORANGE CITY, FL 32763

FEI Number: 26-2805019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAHAM, JOHN H
2101 VISTA PARKWAY STE 126
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

GRAHAM, JOHN H
464 KINGS LAKE DR.
DEBARY, FL 32713 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: 04/30/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GRAHAM, JOHN H
Address: 2101 VISTA PARKWAY STE 126
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GRAHAM, JOHN H
Address: 464 KINGS LAKE DR.
City-St-Zip: DEBARY, FL 32713

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: JOHN H GRAHAM MAN 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date