

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056027

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** THE ART OF BALANCED HEALTH, LLC

**Current Principal Place of Business:**

12413 ADVENTURE DR.  
RIVERVIEW, FL 33579

**New Principal Place of Business:**

**Current Mailing Address:**

12413 ADVENTURE DR.  
RIVERVIEW, FL 33579

**New Mailing Address:**

FEI Number: 26-1233456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMP, ELIZABETH  
12413 ADVENTURE DR.  
RIVERVIEW, FL 33579 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: CAMP, ELIZABETH  
Address: 12413 ADVENTURE DR.  
City-St-Zip: RIVERVIEW, FL 33579

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: ELIZABETH CAMP, ND

MGR

04/25/2012

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