2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L08000056332

Entity Name: LIVIBRANCE CENTER, LLC

Current Principal Place of Business:

824 BAY STREET N.E. UNIT B
ST. PETERSBUGR, FL 33701

New Principal Place of Business:

824 BAY STREET N.E.
UNIT B
ST. PETERSBURG, FL 33701

Current Mailing Address:

824 BAY STREET N.E. UNIT B
ST. PETERSBUGR, FL 33701

New Mailing Address:

824 BAY STREET N.E.
UNIT B
ST. PETERSBURG, FL 33701

FEI Number: 26-3517576 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLEINMAN, LORI
824 BAY STREET N.E. UNIT B
ST. PETERSBUGR, FL 33701 US

Name and Address of New Registered Agent:

KLEINMAN, LORI PHD
824 BAY STREET N.E.
UNIT B
ST. PETERSBURG, FL 33701 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: LORI KLEINMAN 04/30/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KLEINMAN, LORI
Address: 824 BAY STREET N.E. UNIT B
City-St-Zip: ST. PETERSBUGR, FL 33701

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: LORI KLEINMAN MGR 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date