

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000061356

FILED
Apr 22, 2012
Secretary of State

Entity Name: BOWEN SPEECH-LANGUAGE THERAPY, LLC

Current Principal Place of Business:

2439 BOND AVENUE
CLEARWATER, FL 33759 US

New Principal Place of Business:

3001 EASTLAND BLVD.
BLDG. G SUITE 5
CLEARWATER, FL 33761 US

Current Mailing Address:

2439 BOND AVENUE
CLEARWATER, FL 33759 US

New Mailing Address:

FEI Number: 27-0420507 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOWEN, CYNTHIA W
2439 BOND AVENUE
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

BOWEN, CYNTHIA W
3001 EASTLAND BLVD.
BLDG. G SUITE 5
CLEARWATER, FL 33761 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: _____

Electronic Signature of Registered Agent

04/22/2012

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOWEN, CYNTHIA W
Address: 3001 EASTLAND BLVD, BLDG G SUITE 5
City-St-Zip: CLEARWATER, FL 33761 US

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: CYNTHIA W. BOWEN

MGR

04/22/2012

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