

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000123313

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** OCEAN ACUPUNCTURE OF NORTH PALM BEACH, LLC

**Current Principal Place of Business:**

1216 US HWY 1  
SUITE A  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

124 LAKESHORE DRIVE  
PH31  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

**FEI Number:** 27-1572974      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

O'MEARA, JACQUELINE  
124 LAKESHORE DRIVE  
PH31  
NORTH PALM BEACH, FL 33408 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:** O'MEARA, JACQUELINE  
**Address:** 124 LAKESHORE DRIVE PH31  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

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: JACQUELINE O'MEARA      MGR      02/08/2011

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