2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2011
Secretary of State

DOCUMENT# L10000022854

Entity Name: HANDS OF CHOICE MASSAGE THERAPY, LLC

Current Principal Place of Business:

7334 LITTLE ROAD
UNIT 101
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

2523 SEVEN SPRINGS BLVD.
TRINITY, FL 34655

New Mailing Address:

7322 LITTLE ROAD
NEW PORT RICHEY, FL 34654

FEI Number: 27-2005944 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARLSON, TAMARA
2523 SEVEN SPRINGS BLVD.
TRINITY, FL 34655 US

Name and Address of New Registered Agent:

CARLSON, TAMARA
7322 LITTLE ROAD
NEW PORT RICHEY, FL 34654 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: TAMARA CARLSON 04/13/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: CARLSON, RICHARD
Address: 7322 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

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 Statues.

SIGNATURE: RICHARD CARLSON P 04/13/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date