2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# P10000008012

Entity Name: TALLAHASSEE HYPNOTHERAPY, INC.

Current Principal Place of Business:

820 E. PARK AVE., BLDG A, STE 200
TALLAHASSEE, FL 32301

New Principal Place of Business:

820 E. PARK AVE.
A-200
TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 13662
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 27-1745407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KESTENBAUM, CASSANDRA
325 JOHN KNOX RD., T, STE 2
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

KESTENBAUM, CASSANDRA
820 E. PARK AVE.
A-200
TALLAHASSEE, FL 32301 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: _____ 02/16/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: KESTENBAUM, CASSANDRA
Address: P.O. BOX 13662
City-St-Zip: TALLAHASSEE, FL 32317

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CASSANDRA KESTENBAUM P 02/16/2011
Electronic Signature of Signing Officer or Director — Date