

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000072312

Entity Name: TOTAL HEALTH GUIDANCE LLC

Current Principal Place of Business:

5401 S. KIRKMAN RD.
SUITE #760
ORLANDO, FL 32819

Current Mailing Address:

5401 S. KIRKMAN RD.
SUITE #760
ORLANDO, FL 32819 US

FEI Number: 45-2590345

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STITELER, JOHN D
5401 S. KIRKMAN RD.
SUITE #760
ORLANDO, FL 32819 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

Date

Authorized Person(s) Detail :

Title MGRM
Name STITELER, JOHN D
Address 5401 S. KIRKMAN RD.
SUITE #760
City-State-Zip: ORLANDO FL 32819

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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN STITELER

OWNER

02/08/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date