

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102777

FILED
May 01, 2009
Secretary of State

Entity Name: A WELL ORGANIZED SPACE LLC

Current Principal Place of Business:

2045 COREY RD
MALABAR, FL 32950

New Principal Place of Business:

2025 COREY RD
MALABAR, FL 32950

Current Mailing Address:

2045 COREY RD
MALABAR, FL 32950

New Mailing Address:

2025 COREY RD
MALABAR, FL 32950

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

EDEN, LAETITIA J
2045 COREY RD
MALABAR, FL 32950 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 () Delete
Name: EDEN, LAETITIA J
Address: 2045 COREY RD
City-St-Zip: MALABAR, FL 32950 US

Title: MGRM () Delete
Name: EDEN, ANTHONY R
Address: 2045 COREY RD
City-St-Zip: MALABAR, FL 32950 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EDEN, LAETITIA J
Address: 2025 COREY RD
City-St-Zip: MALABAR, FL 32950 US

Title: MGRM (X) Change () Addition
Name: EDEN, ANTHONY R
Address: 2025 COREY RD
City-St-Zip: MALABAR, FL 32950 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: LAETITIA EDEN

MGR

05/01/2009

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