

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010312

Entity Name: NULIFE SOLUTIONS, LLC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

3501 RIGA BLVD., SUITE 300
TAMPA, FL 33619

New Principal Place of Business:

345 BAYSHORE BLVD., #1702
TAMPA, FL 33606

Current Mailing Address:

3501 RIGA BLVD., SUITE 300
TAMPA, FL 33619

New Mailing Address:

345 BAYSHORE BLVD., #1702
TAMPA, FL 33606

FEI Number: 59-3727198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONSACK, KRISTEN M
345 BAYSHORE BLVD, STE 1702
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

BONSACK, KRISTIN M
345 BAYSHORE BLVD, #1702
TAMPA, FL 33606 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: KRISTIN M. BONSACK

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BONSACK, KRISTEN M
Address: 345 BAYSHORE BLVD, STE 1702
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BONSACK, KRISTIN M
Address: 345 BAYSHORE BLVD, #1702
City-St-Zip: TAMPA, FL 33606

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: KRISTIN M. BONSACK

MGR

04/27/2007

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