

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018359

FILED
May 12, 2009
Secretary of State

Entity Name: A BETTER LIFE DEVELOPMENT, LLC

Current Principal Place of Business:

1285 SEMINOLA BLVD
#117-200
CASSELBERRY, FL 32707

New Principal Place of Business:

390 SANSU COURT
LONGWOOD, FL 32750

Current Mailing Address:

1285 SEMINOLA BLVD
#117-200
CASSELBERRY, FL 32707

New Mailing Address:

PO BOX 181792
CASSELBERRY, FL 327181792

FEI Number: 11-3649967 FEI Number Applied For () FEI Number Not Applicable () 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:

POLLOCK, ADAM D
1285 SEMINOLA BLVD
#117-200
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

POLLOCK, ADAM D
390 SANSU COURT
LONGWOOD, FL 32750 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:

05/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POLLOCK, ADAM D
Address: 1285 SEMINOLA BLVD #117-200
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POLLOCK, ADAM D
Address: PO BOX 181792
City-St-Zip: CASSELBERRY, FL 327181792

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: ADAM POLLOCK

MGMR

05/12/2009

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