2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000027529

1. Entity Name
THE PILLHELP COMPANY, LLC



FILED Sep 09, 2008 08:00 AM Secretary of State

Principal Place of Business

8191 BRETON CIRCLE FT. MYERS, FL 33912 Mailing Address

8191 BRETON CREEK CIRCLE
FT. MYERS, FL 33912



DO NOT WRITE IN THIS SPACE

05302008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 81-0576974 Applied For Not Applicab

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THIBODEAU, DONALD RPH 8191 BRETON CIRCLE FT. MYERS, FL 33912

NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for tions of registered agent.	r the purpose of cha	nging its registered	d office or registered agent, or	r both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered	Agent signature required when reinstating	p) DATE	
	E NOW!!! FEE IS \$138.75 b by September 12, 2008	In accordan liability com	ce with s. 607.19 pany did not rece	3(2)(b), F.S., the limited live the prior notice.		
9.	MANAGING MEMBE	RS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR THIBODEAU, DONALD 8191 BRETON CIRCLE FORT MYERS, FL 33912					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				C	U00000959333 09/09/08-80006-013 138.75	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE						

^{11.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.