2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# L04000016781

Entity Name: AT YOUR SERVICE DESTIN, LLC

Current Principal Place of Business:

4728 RENDEZVOUS COVE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

4728 RENDEZVOUS COVE
DESTIN, FL 32541

New Mailing Address:

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:

HOLAHAN, JOHN
4728 RENDEZVOUS COVE
DESTIN, FL 32541 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: HOLAHAN, JOHN
Address: 4728 RENDEZVOUS COVE
City-St-Zip: DESTIN, FL 32541

Title: MGR ( ) Delete
Name: HOLAHAN, JENNIFER
Address: 4728 RENDEZVOUS COVE
City-St-Zip: DESTIN, FL 32541

Title: MGR ( ) Delete
Name: BAUGHMAN, SHANA
Address: 1687 GLENWOOD CT.
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOHN HOLAHAN OWN 09/04/2007

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