2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 28, 2006
Secretary of State

DOCUMENT# L04000024309

Entity Name: NO STRESSURE, LLC

Current Principal Place of Business:

2205 VALRICO FOREST DRIVE
VALRICO, FL 33594

New Principal Place of Business:

115 E. COLONIAL COURT
UNIT A
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

2205 VALRICO FOREST DRIVE
VALRICO, FL 33594

New Mailing Address:

115 E. COLONIAL COURT
UNIT A
INDIAN HARBOUR BEACH, FL 32937

FEI Number: 57-1214890 **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:

LEHNER, KEN
2205 VALRICO FOREST DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

LEHNER, KEN
115 E. COLONIAL COURT
UNIT A
INDIAN HARBOUR BEACH, FL 32937 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: KEN LEHNER 05/28/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LEHNER, KEN
Address: 2205 VALRICO FOREST DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LEHNER, KEN
Address: 115 E. COLONIAL COURT UNIT A
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

I hereby certify that the information supplied with this filing does not qualify for the 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: KEN LEHNER MGRM 05/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date