


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2006 8:00 am**  
**Secretary of State**

2/1

02-06-2006 90178 004 \*\*\*\*50.00

<b>DOCUMENT # L04000037668</b> 1. Entity Name <b>SIMPLY BETTER SERVICES LLC</b>	
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Principal Place of Business <b>14 UTILITY DRIVE PALM COAST, FL 32137 US</b>	Mailing Address <b>100 PALM HARBOR PKWY. 16 PALM COAST, FL 32137 US</b>
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01242006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-1139811</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>ROBERT, BAUMANN L 100 PALM HARBOR PARKWAY 16 PALM COAST, FL 32137</b>
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IN THIS SPACE**

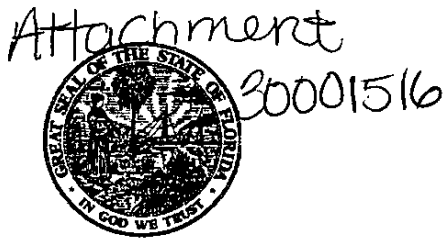
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <u><i>Robert L Baumann</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <u>1-24-06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BAUMANN, ROBERT L 100 PALM HARBOR PKWY.# 16 PALM COAST, FL 32137
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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.	
SIGNATURE: <u><i>Robert L Baumann</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE</small>	Date _____ Daytime Phone # _____



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2006

SIMPLY BETTER SERVICES LLC  
100 PALM HARBOR PKWY.  
16  
PALM COAST, FL, 32137 US

Subject: **SIMPLY BETTER SERVICES LLC**

Reference Number: **L04000037668**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cc

ANNUAL REPORTS SECTION