


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90359 037 \*\*\*\*50.00

<b>DOCUMENT # L05000036124</b> 1. Entity Name <b>SENIORS AND YOU, LLC</b>	
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Principal Place of Business <b>5667 BEVIS RD. BASCOM, FL 32423</b>	Mailing Address <b>5667 BEVIS RD. BASCOM, FL 32423</b>
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**DO NOT WRITE IN THIS SPACE**



04132007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>52-2487017</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent  
**MOUNT, SUSIETT  
5667 BEVIS RD.  
BASCOM, FL 32423**

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>MGRM BROWN, LORETHA P.O. BOX 21 GREENWOOD, FL 32443</del> <i>→ Delete per Susiett Mount 4/13/07</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOUNT, SUSIETT 5667 BEVIS RD. BASCOM, FL 32423
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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 606, Florida Statutes.

**SIGNATURE:** *Susiett Mount* **4/13/07** **(813) 491-4168**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #