

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000056593

FILED
May 18, 2009
Secretary of State

Entity Name: BETTER LIVING SYSTEMS, LLC

Current Principal Place of Business:

290 ANCHOR RD
#104
CASSELBERRY, FL 32718

Current Mailing Address:

PO BOX 180893
CASSELBERRY, FL 32718

New Principal Place of Business:

6450 UNIVERSITY BLVD
2
WINTER PARK, FL 32792 US

New Mailing Address:

PO BOX 2489
GOLDENROD, FL 32733 US

FEI Number: 20-3278336 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:

SHIRLEY, JONATHAN W
171 CIRCLE DRIVE
MAITLAND, FL 32751 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: DIR () Delete
Name: ENRIGHT, MICHAEL
Address: 14609 WHITTRIDGE RD
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES:

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: MICHAEL ENRIGHT

PRES

05/18/2009

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