2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 12, 2007 08:00 AM Secretary of State **DOCUMENT # L05000065635** 1. Entity Name EVEN BALANCE, L.L.C. Principal Place of Business Mailing Address **609 DOUGLAS DRIVE 609 DOUGLAS DRIVE** JUPITER, FL 33458 JUPITER, FL 33458 CR2E083 (11/05) 04102007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0900473 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BROWN, LLOYD P MM 609 DOUGLAS DRIVE JUPITER, FL 33458 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9, TITLE BROWN, LLOYD P MGRM NAME STREET ADDRESS 609 DOUGLAS DRIVE CITY-ST-ZIP JUPITER, FL. 33458 TITLE 000000702436 04/20/07-80099-011 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 replyined by Chapter 608, Florida Statutes.

SIGNATURE: / full Prows of had

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1/2/07 561-758-772

FILED