

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070719

**FILED**  
**Mar 26, 2008**  
**Secretary of State**

**Entity Name:** NSIGHT LIFE COACHING LLC

**Current Principal Place of Business:**

7021 GRAND NATIONAL DRIVE  
SUITE 102  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

6425 WELLINGTON DRIVE  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 20-3296611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MILNER, LINDA M  
7021 GRAND NATIONAL DRIVE  
SUITE 102  
ORLANDO, FL 32819 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: MGR ( ) Delete  
Name: MILNER, LINDA M  
Address: 6425 WELLINGTON DRIVE  
City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Delete  
Name: ILIFF, TIMOTHY H  
Address: 6425 WELLINGTON DRIVE  
City-St-Zip: ORLANDO, FL 32819

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TIMOTHY ILIFF

MGRM

03/26/2008

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