

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071415

Entity Name: LIVING SPACES LLC

FILED
May 15, 2008
Secretary of State

Current Principal Place of Business:

17739 AYRSHIRE BLVD
LAND O LAKES, FL 34638

New Principal Place of Business:

4701 SUMMER LAKE CT
TAMPA, FL 33624

Current Mailing Address:

P O BOX 340186
TAMPA, FL 33694

New Mailing Address:

P O BOX 342783
TAMPA, FL 33694

FEI Number: 86-1151166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: LINARES, GINA
Address: 17739 AYRSHIRE BLVD
City-St-Zip: LAND O LAKES, FL 34638

Title: MGRM () Delete
Name: LINARES, ROBERT M
Address: 17739 AYRSHIRE BLVD
City-St-Zip: LAND O LAKES, FL 34638

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LINARES, ROBERT M
Address: 4701 SUMMER LAKE CT
City-St-Zip: TAMPA, FL 33624

Title: MGR (X) Change () Addition
Name: LINARES, GINA H
Address: 4701 SUMMER LAKE CT
City-St-Zip: TAMPA, FL 33624

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: ROBERT M LINARES

MGRM

05/15/2008

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