

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000118342

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** ALWAYS PROMOTING INDEPENDENCE, LLC

**Current Principal Place of Business:**

7744 66TH STREET NORTH  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2003  
PINELLAS PARK, FL 33780

**New Mailing Address:**

**FEI Number:** 20-4039275

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRIBBLE, DAR-LYN E  
6721 BONNIE BAY CIRCLE  
PINELLAS PARK, FL 33781 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  
**Name:** PRIBBLE, DAR-LYN E  
**Address:** 6721 BONNIE BAY CIRCLE  
**City-St-Zip:** PINELLAS PARK, FL 33781

**Title:** MGR  
**Name:** CAIRNS, MICHELLE L  
**Address:** 2714 WOODRING DRIVE  
**City-St-Zip:** CLEARWATER, FL 33759

I hereby 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:** DAR-LYN PRIBBLE

MGR

02/12/2010

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