

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015616

Entity Name: BABY EMMA, LLC

FILED  
Jan 23, 2007  
Secretary of State

**Current Principal Place of Business:**

96321 BAY VIEW DR.  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

4413 TOWN CENTER PARKWAY  
217  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

96321 BAY VIEW DR.  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

4413 TOWN CENTER PARKWAY  
217  
JACKSONVILLE, FL 32246

FEI Number: 26-0135695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRADEN, LISA  
4623 FOREST HILL BLVD., STE 111  
WEST PALM BEACH, FL 33415 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: SAG, ANN M  
Address: 4623 FOREST HILL BLVD., STE 111  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SAG, ANN M  
Address: 4413 TOWN CENTER PARKWAY #217  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: ANN M SAG

MRS.

01/23/2007

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