

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025819

FILED
Jan 08, 2008
Secretary of State

Entity Name: ADVANCED SLEEP CENTERS, LLC

Current Principal Place of Business:

906 NORTH SINCLAIR AVE
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

906 NORTH SINCLAIR AVE
TAVARES, FL 32778

New Mailing Address:

FEI Number: 56-2566106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, STEPHEN R
36755 ALAQUA CT
EUSTIS, FL 32736 US

Name and Address of New Registered Agent:

MCDONALD, STEPHEN R
359 BLUE BRANCH ST.
EUSTIS, FL 32736 US

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:

01/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCDONALD, STEPHEN R
Address: 36755 ALAQUA CT
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCDONALD, STEPHEN R
Address: 359 BLUE BRANCH ST.
City-St-Zip: EUSTIS, FL 32736

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: STEPHEN R MCDONALD

PRES

01/08/2008

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