

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031043

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** THEPROBATEHELPER, L.L.C.

**Current Principal Place of Business:**

4057 EVERETT AVENUE  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

4057 EVERETT AVENUE  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** 56-2581015      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: ZARZA, PATRICK  
Address: 4057 EVERETT AVENUE  
City-St-Zip: SPRING HILL, FL 34609

Title: MGR      ( ) Delete  
Name: BENNETT, RICHARD  
Address: 7100 BARCLAY AVE APT A  
City-St-Zip: BROOKSVILLE, FL 34609

**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: PATRICK ZARZA

MR.

05/01/2007

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