2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037666

BLACKBURN, JAN

2044 OLENTARY WAY

SARASOTA, FL 34231

Name:

Address:

City-St-Zip:

Entity Name: MY STRESS FREE HOME LLC

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2044 OLENTARY WAY SARASOTA, FL 34231 **Current Mailing Address: New Mailing Address:** 2044 OLENTARY WAY SARASOTA, FL 34231 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLACKBURN, WANDA 2044 OLENTARY WAY SARASOTA, FL 34231 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: ADDITIONS/CHANGES: MGRM Title: (X) Change () Addition () Delete BLACKBURN, WANDA BLACKBURN, WANDA Name: Name: Address: 2044 OLENTARY WAY Address: 2044 OLENTARY WAY City-St-Zip: SARASOTA, FL 34231 City-St-Zip: SARASOTA, FL 34231 Title: MGRM () Delete Title: () Change () Addition

Name:

Address:

City-St-Zip:

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 WALKER, KIM

 Address:
 Address:
 21408 TINA STREET

 City-St-Zip:
 City-St-Zip:
 CHUGIAK, AK 99567

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: WANDA BLACKBURN MGR 01/18/2007