

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051393

FILED
Apr 30, 2009
Secretary of State

Entity Name: LIFE SPHERES, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

160 VILLAGE BLVD
#A
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

PO BOX 8704
JUPITER, FL 33468

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCNEAL, S.J.
160 VILLAGE BLVD VILLA A
TEQUESTA, FL 33469 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: MCNEAL, S.J.
Address: PO BOX 8704
City-St-Zip: JUPITER, FL 33468

Title: MGRM () Delete
Name: KEAVY, MICHAEL M
Address: 13020 154TH PLACE NORTH
City-St-Zip: JUPITER FARMS, FL 33478

Title: MGRM () Delete
Name: BERRY, CAROLINE
Address: 333 LAS OLAS WAY #1701
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: S.J. MCNEAL

MGR

04/30/2009

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