

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000057959

**FILED  
Apr 12, 2010  
Secretary of State**

**Entity Name:** NATURE'S NEEDS, LLC

**Current Principal Place of Business:**

5648 MAPLE FOREST DRIVE  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

5648 MAPLE FOREST DRIVE  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

**FEI Number:** 20-4996201      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

INGRAM, SPENCER  
118 SALEM CT.  
TALLAHASSEE, FL 32301 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:** MGRM  
**Name:** MCCLEEARY, LESLIE  
**Address:** 5648 MAPLE FOREST DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32303 US

I hereby 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: LESLIE MCCLEEARY      OWNE      04/12/2010

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