

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000070571

1. Entity Name
CHOICES IN INDEPENDENCE, LLC



Principal Place of Business

608 4TH AVE. SW
RUSKIN, FL 33570 US

Mailing Address

608 4TH AVE. SW
RUSKIN, FL 33570 US

DO NOT WRITE IN THIS SPACE



01142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
65-1285223

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ASHLEY, MARISA K
608 4TH AVE SW
RUSKIN, FL 33570

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MS.
ASHLEY, MARISA K
608 4TH AVE SW
RUSKIN, FL 33570

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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U000000784455
01/16/08-80006-026 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Marisa Ashley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

01-14-08

Date

813-714-4287

Daytime Phone #