

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000102628

1. Entity Name

POSITION FOR SUCCESS, LLC



Principal Place of Business

15120 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331 US

Mailing Address

15120 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331 US

FILED

08 SEP 10 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09012008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KATZ, MICHAEL H
15120 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331

**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

09/02/08

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

900127313799
05/02/08--01020--019 **25.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
OWNE
KATZ, MICHAEL H MR
15120 WHETSTONE WAY
SOUTHWEST RANCHES, FL 33331

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

05/02/08 -- 01020 -- 019 XX 25.00

400135993664
09/17/08--01006--003 **113.75

**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:

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

09/02/08

Date

Daytime Phone #