

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113056

Entity Name: THE VITALITY FACTOR, LLC

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

345 BAYSHORE BOULEVARD  
#1702  
TAMPA, FL 33606

## New Principal Place of Business:

1537 STATE STREET  
SARASOTA, FL 34236

## Current Mailing Address:

345 BAYSHORE BOULEVARD  
#1702  
TAMPA, FL 33606

## New Mailing Address:

1537 STATE STREET  
SARASOTA, FL 34236

FEI Number: 20-5951309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONSACK, KRISTIN M  
345 BAYSHORE BLVD  
#1702  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

BONSACK, KRISTIN M  
1537 STATE STREET  
SARASOTA, FL 34236 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: KRISTIN M. BONSACK

04/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BONSACK, KRISTIN M  
Address: 345 BAYSHORE BOULEVARD, #1702  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BONSACK, KRISTIN M  
Address: 1537 STATE STREET  
City-St-Zip: SARASOTA, FL 34236

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: KRISTIN M. BONSACK

MGR

04/27/2007

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