

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114649

Entity Name: PILLHELP WORKS, LLC

FILED  
Apr 30, 2007  
Secretary of State

**Current Principal Place of Business:**

8191 BRETON CIRCLE  
FT. MYERS, FL

**New Principal Place of Business:**

**Current Mailing Address:**

8191 BRETON CIRCLE  
FT. MYERS, FL

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

THIBODEAU, DONALD W  
8191 BRETON CIRCLE  
FT. MYERS, FL US

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

THIBODEAU, DONALD W  
8191 BRETON CIRCLE  
FT. MYERS, FL 33912 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:

04/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THIBODEAU, DONALD W  
Address: 8191 BRETON CIRCLE  
City-St-Zip: FT. MYERS, FL

**ADDITIONS/CHANGES:**

Title: MR. (X) Change ( ) Addition  
Name: THIBODEAU, DONALD W RPH  
Address: 8191 BRETON CIRCLE  
City-St-Zip: FT. MYERS, FL 33912

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: DONALD W THIBODEAU, RPH

MR.

04/30/2007

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