

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015789

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** LIFE'S CONNECTIONS, PLLC

**Current Principal Place of Business:**

2 SOUTH UNIVERSITY DRIVE, STE. 304  
PLANTATION, FL 33324

**New Principal Place of Business:**

2220 N. ATLANTIC BLVD.  
FORT LAUDERDALE, FL 33305

**Current Mailing Address:**

2 SOUTH UNIVERSITY DRIVE, STE. 304  
PLANTATION, FL 33324

**New Mailing Address:**

2220 N. ATLANTIC BLVD.  
FORT LAUDERDALE, FL 33305

FEI Number: 20-8498536      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
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      ( ) Delete  
Name: MITCHELL, KATE  
Address: 2 SOUTH UNIVERSITY DRIVE, STE. 304  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: MITCHELL, KATE  
Address: 2220 N. ATLANTIC BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33305

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: KATHERINE L. MITCHELL

MGRM

05/01/2008

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