

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020687

FILED
Apr 29, 2009
Secretary of State

Entity Name: A+ DEBT FREE, LLC

Current Principal Place of Business:

205 MONTGOMERY AVENUE #3
SARASOTA, FL 34243

New Principal Place of Business:

7366 EATON COURT
UNIVERSITY PARK, FL 34201

Current Mailing Address:

7366 EATON COURT
UNIVERSITY PARK, FL 34201

New Mailing Address:

FEI Number: 81-0553537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W. CYPRESS CREEK ROAD, STE. 700
FT. LAUDERDALE, FL 33309 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: MGR () Delete
Name: LARSON, SHARON
Address: 5514 N. ORMONDO WAY
City-St-Zip: LITCHFIELD PARK, AZ 85340

Title: MGR () Delete
Name: LEFFLER, ALLAN
Address: 2727 PENZANCE STREET
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR () Delete
Name: SEAMAN, KELLY M
Address: 24229 IONA AVE.
City-St-Zip: MORRISTOWN, MN 55052

Title: MGR () Delete
Name: CASTOR, DEVORAH
Address: 7366 EATON COURT
City-St-Zip: UNIVERSITY PARK, FL 34201

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LARSON, SHARON
Address: 4431 N. CONDA CT.
City-St-Zip: LITCHFIELD PARK, AZ 85340

Title: MGR (X) Change () Addition
Name: LEFFLER, ALLAN
Address: 2081 NORTH POINTE ALEXIS DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEVORAH CASTOR

MGRM

04/29/2009

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