

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000028877

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** STRUCTURE OF LIFESTYLE LLC

**Current Principal Place of Business:**

1660 TARPON BAY DRIVE S APT 101  
NAPLES, FL 34119

**New Principal Place of Business:**

1660 TARPON BAY DRIVE S APT 101  
NAPLES, FL 34119 UN

**Current Mailing Address:**

1660 TARPON BAY DRIVE S APT 101  
NAPLES, FL 34119

**New Mailing Address:**

**FEI Number:** 20-8693998      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SERCHAY, ALLAN  
5300 NW 33 AVENUE STE 117  
FORT 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:** MGRM  
**Name:** RICHMAN, ALLEN B  
**Address:** 1660 TARPON BAY DRIVE S APT 101  
**City-St-Zip:** NAPLES, FL 34119

**Title:** MGRM  
**Name:** RICHMAN, MARIA C  
**Address:** 1660 TARPON BAY DRIVE S APT 101  
**City-St-Zip:** NAPLES, FL 34119

I hereby 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:** ALLEN B. RICHMAN

MGRM

03/20/2012

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