

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000042684

FILED
Jan 25, 2008
Secretary of State

Entity Name: PRIMUS VITAE, LLC.

Current Principal Place of Business:

2880 BEAVER RIDGE LOOP
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

2880 BEAVER RIDGE LOOP
CLERMONT, FL 34711

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUTIERREZ, MANUEL A
2880 BEAVER RIDGE LOOP
CLERMONT, FL 34711 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: GUTIERREZ, MANUEL A
Address: 2880 BEAVER RIDGE LOOP
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR () Delete
Name: GUTIERREZ, ALEJANDRO
Address: 2696 KINGSTON RIDGE DR.
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR () Delete
Name: GUTIERREZ, ADRIANA
Address: 1772 NATURE COVE LN.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

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

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: MANUEL GUTIERREZ

MGR

01/25/2008

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