

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067822

FILED
Apr 30, 2008
Secretary of State

Entity Name: BONITA BLISS, LLC

Current Principal Place of Business:

29080 ALESSANDRIA CIRCLE
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

29080 ALESSANDRIA CIRCLE
BONITA SPRINGS, FL 34135

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:

NORTH, MORGAN
29080 ALESSANDRIA CIRCLE
BONITA SPRINGS, FL 34135 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: RIZK, LISA
Address: 28823 VERMILLION
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Delete
Name: NORTH, MORGAN
Address: 29080 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Delete
Name: HERNER, TEENA
Address: 29080 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Delete
Name: LITTLETON, TERRI
Address: 9834 MOORINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NORTH, MORGAN
Address: 29080 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

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

Title: MGRM (X) Change () Addition
Name: HERNER, TEENA
Address: 9834 MOORINGS DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGRM (X) Change () Addition
Name: LITTLETON, TERRI
Address: 29080 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Change (X) Addition
Name: RIZK, LISA
Address: 29080 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

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: MORGAN NORTH

MGRM

04/30/2008

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