

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000075903

FILED  
May 16, 2009  
Secretary of State

**Entity Name:** INNER STRENGTH RESOURCES, LLC

**Current Principal Place of Business:**

14270 MANCHESTER DRIVE  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

14270 MANCHESTER DRIVE  
NAPLES, FL 34114

**New Mailing Address:**

**FEI Number:** 26-0817732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOSTER BURR, KAREN ESQ.  
76 S. LAURA STREET  
2110  
JACKSONVILLE, FL 32202 US

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

KOSTER BURR, KAREN ESQ.  
1301 RIVERPLACE BLVD.  
1916  
JACKSONVILLE, FL 32207 US

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:**

05/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BURLING, ANNA  
Address: 14270 MANCHESTER DRIVE  
City-St-Zip: NAPLES, FL 34114

Title: MGRM ( ) Delete  
Name: BURLING, GUNNAR  
Address: 14270 MANCHESTER DRIVE  
City-St-Zip: NAPLES, FL 34114

**ADDITIONS/CHANGES:**

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:** ANNA BURLING

MGRM

05/16/2009

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