

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079738

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: LIFESHAPERS INTERNATIONAL LLC

**Current Principal Place of Business:**

801 W GRANADA BLVD  
SUITE # 301  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

2917 S ATLANTIC AVE  
SUITE # 1104  
DAYTONA BEACH SHORES, FL 32118 US

**New Mailing Address:**

FEI Number: 26-0667794      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRYAN, MARY W  
2917 S ATLANTIC AVE  
SUITE # 1104  
DAYTONA BEACH SHORES, FL 32118 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: BRYAN, MARY W  
Address: 2917 S ATLANTIC AVE SUITE # 1104  
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BRYAN, MARY W  
Address: 2917 S ATLANTIC AVE SUITE # 1104  
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: MGRM ( ) Change (X) Addition  
Name: SALMON, JOHN E  
Address: 1484 TOMOKA FARMS ROAD  
City-St-Zip: DAYTONA BEACH, FL 32124

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: MARY W BRYAN

MGRM

04/15/2009

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