

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083627

FILED
Apr 14, 2008
Secretary of State

Entity Name: GENTLE GEMSTONE THERAPIES, LLC

Current Principal Place of Business:

12 VILLA COURT
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 614
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 26-0728265 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHELDON, PAULA K
12 VILLA COURT
SAFETY HARBOR, FL 34695 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 () Delete
Name: SHELDON, PAULA K
Address: 12 VILLA COURT
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHELDON, PAULA K
Address: P.O.BOX 614
City-St-Zip: SAFETY HARBOR, FL 34695

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: PAULA K SHELDON

MS.

04/14/2008

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