

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000106783

FILED
Apr 21, 2009
Secretary of State

Entity Name: HEAVENLY BLESSINGS CHRISTIAN BOOKS + GIFTS LLC

Current Principal Place of Business:

ADAMS PLACE LLC
1605 SE PT ST LUCIE BLVD.
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1629 SE PORT ST LUCIE BLVD.
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 30-0446953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, LESLIE
116 SW PILSNER CIRCLE
PORT ST LUCIE, FL 34953 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: BELL, LESLIE
Address: 116 SW PILSNER CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGR () Delete
Name: GEORGE, MELANIE
Address: 1430 SW SULTAN DRIVE
City-St-Zip: PORT ST LUCIE, FL 34953

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: LESLIE BELL

MGR

04/21/2009

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