

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000000998

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** TOTAL LIFE SOLUTIONS LLC

**Current Principal Place of Business:**

218 S.W. STARFISH AVE.  
PORT ST. LUCIE, FL 34984

**New Principal Place of Business:**

**Current Mailing Address:**

218 S.W. STARFISH AVE.  
PORT ST. LUCIE, FL 34984

**New Mailing Address:**

**FEI Number:** 41-2265093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SINE-ROSAM, ELIZABETH  
7501 CLEVELAND STREET  
HOLLYWOOD, FL 33024 US

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

SINE-ROSAM, ELIZABETH  
218 SW STARFISH AVENUE  
PORT ST. LUCIE, FL 34984 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:** ELIZABETH SINE-ROSAM

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** SINE-ROSAM, ELIZABETH  
**Address:** 218 S.W. STARFISH AVE.  
**City-St-Zip:** PORT ST. LUCIE, FL 34984

**Title:** MGR  
**Name:** ROSAM, EVERETT R JR  
**Address:** 218 S.W. STARFISH AVE.  
**City-St-Zip:** PORT ST. LUCIE, FL 34984

I hereby 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:** ELIZABETH SINE-ROSAM

MGR.

04/26/2011

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