## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000010886

Entity Name: BLESS THIS MESS LLC

FILED Mar 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1882 TARPON BAY DRIVE SOUTH 2829 INLET COVE LN W NUMBER 301 NAPLES, FL 34120

NAPLES, FL 34119

**Current Mailing Address: New Mailing Address:** 

1882 TARPON BAY DRIVE SOUTH 2829 INLET COVE LN W NUMBER 301 NAPLES, FL 34120

NAPLES, FL 34119

FEI Number: 26-1858254 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

OJANOVAC, JULIE B 2829 INLET COVE LANE WEST NAPLES, FL 34120

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: (X) Change ( ) Addition () Delete

SVEC. CHRISTINA J SVEC, CHRISTINA J Name: Name: Address: 1882 TARPON BAY DRIVE SOUTH #301 Address: 4760 14TH AVE SE City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34117

Title: MGR () Delete Title: () Change () Addition

OJANOVAC, JULIE B Name: Name: Address: 2829 INLET COVE LANE WEST Address: City-St-Zip: NAPLES, FL 34120 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: JULIE B. OJANOVAC 03/10/2009