

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023481

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: FAREWELL 2 STRESS, LLC

**Current Principal Place of Business:**

13046 RACETRACK ROAD  
#136  
TAMPA, FL 33626 US

**New Principal Place of Business:**

**Current Mailing Address:**

13046 RACETRACK ROAD  
#136  
TAMPA, FL 33626 US

**New Mailing Address:**

FEI Number: 41-2272433      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GITOMER, BARBARA S  
13046 RACETRACK ROAD  
#136  
TAMPA, FL FL US

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

GITOMER, BARBARA S  
13046 RACETRACK ROAD  
#136  
TAMPA, FL 33626 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: BARBARA S. GITOMER      04/27/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GITOMER, BARBARA S  
Address: 13046 RACETRACK ROAD, #136  
City-St-Zip: TAMPA, FL 33626 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Delete  
Name: GITOMER, MARC H  
Address: 13046 RACETRACK ROAD, #136  
City-St-Zip: TAMPA, FL 33626 US

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: BARBARA S. GITOMER      MGRM      04/27/2009  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date