

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000071748

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** BREATHE SMILE LOVE, LLC

**Current Principal Place of Business:**

2509 N BANANA RIVER DR  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

2509 N BANANA RIVER DR  
MERRITT ISLAND, FL 32952

**New Mailing Address:**

**FEI Number:** 26-3091002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALWAYS BY THE NUMBERS, INC.  
350 TANGERINE AVENUE, SUITE 1  
MERRITT ISLAND, FL 32953 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  
Name: GRIFFIN, LANCE C MGRM  
Address: 2509 N BANANA RIVER DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM  
Name: GRIFFIN, KAREN C MGRM  
Address: 2509 N BANANA RIVER DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32952

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: KAREN C GRIFFIN

MGRM

01/07/2010

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