

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000093325

Entity Name: ESSENTIAL RESULTS, LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4870-A ORLEANS COURT  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 18824  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ASBERRY, HATTIE R  
4870-A ORLEANS COURT  
WEST PALM BEACH, FL 33415 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: CEO  
Name: ASBERRY, HATTIE R  
Address: 4870-A ORLEANS COURT  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: PRES  
Name: ASBERRY, REGINALD B  
Address: 4870-A ORLEANS COURT  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP  
Name: DUVAL, JASMYNE A  
Address: 266 RIVER BLUFF LANE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: HATTIE R. ASBERRY

CEO

04/30/2011

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