2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109925

2427 NW 108 TERRACE

City-St-Zip: SUNRISE, FL 33322 US

Address:

Entity Name: FLORIDA LIFE SAVING SOLUTIONS, LLC

FILED Aug 04, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Pla	ice of Business:	
2800 SW 8 DAVIE, FL	81ST TERRACE . 33328 US			
Current Mailing Address:		New Mailing Add	New Mailing Address:	
2800 SW 8 DAVIE, FL	81ST TERRACE . 33328 US			
	: 90-0507252 FEI Number Applied lace with s. 607.193(2)(b), F.S., the limited	For() FEI Number Not Applicable() liability company did not receive the prior no		
Name and	d Address of Current Registered A	Agent: Name and Addres	s of New Registered Agent:	
5125 ADA SUITE 500	N SAFETY COUNCIL, INC. NSON ST.) D, FL 32804 US			
	e named entity submits this statemer e of Florida.	nt for the purpose of changing its registe	ered office or registered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Regis	stered Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES	3:	
Title: Name: Address: City-St-Zip:	MGRM () Delete SEPIELLI, JON 2800 SW 81ST TERRACE DAVIE, FL 33328 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name [:]	MGRM () Delete	Title: Name:	() Change () Addition	

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: JON T SEPIELLI MGRM 08/04/2009