

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113583

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: NATURALI PRO FLORIDA, LLC

**Current Principal Place of Business:**

7350 S TAMIAMI TRAIL  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

7350 S TAMIAMI TRAIL  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

JEFFRIES, DAVID M  
1227 N FRANKLIN STREET  
TAMPA, FL 33602 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: TAHIRI, ALI R DR  
Address: 6940 SCRUB JAY DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: MGR ( ) Change (X) Addition  
Name: DYGERT, JAMES J MR  
Address: 2217 DESOTO RD  
City-St-Zip: SARASOTA, FL 34243

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: ALI TAHIRI

DR

04/30/2009

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