

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116934

Entity Name: CARPE DIEM TODAY LLC

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

250 TEQUESTA DRIVE  
SUITE 200  
TEQUESTA, FL 33469 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 3010  
TEQUESTA, FL 33469 US

## New Mailing Address:

3N210 JOAN DRIVE  
SAINT CHARLES, IL 60175 US

FEI Number: 30-0534560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CIOFFI, JAMES A  
250 TEQUESTA DRIVE  
SUITE 200  
TEQUESTA, FL 33469 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: MGR ( ) Delete  
Name: DEMARTINO, JOHN  
Address: PO BOX 3010  
City-St-Zip: TEQUESTA, FL 33469 US

Title: MGR ( ) Delete  
Name: DEMARTINO, ANN  
Address: PO BOX 3010  
City-St-Zip: TEQUESTA, FL 33469 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DEMARTINO, JOHN  
Address: 600 UNO LAGO DRIVE #402  
City-St-Zip: JUNO BEACH, FL 33408 US

Title: MGR (X) Change ( ) Addition  
Name: DEMARTINO, ANN  
Address: 600 UNO LAGO DRIVE #402  
City-St-Zip: JUNO BEACH, FL 33408 US

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: JOHN DEMARTINO

MR.

03/24/2009

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