

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000073784

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA SPA ASSOCIATION, LLC

**Current Principal Place of Business:**

2353 SW 132ND STREET  
DAVIE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

2353 SW 132ND STREET  
DAVIE, FL 33325

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MOSES, ILANA  
2353 SW 132ND WAY  
DAVIE, FL 33325 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  
Name: MOSES, ILANA  
Address: 2353 SW 132ND WAY  
City-St-Zip: DAVIE, FL 33325

Title: MGRM  
Name: KONIECZNY, KRISTI  
Address: 3788 HIGH STREET  
City-St-Zip: DENVER, CO 80205

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:** ILANA MOSES

MGR

01/21/2010

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