

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000016775

Entity Name: FAMILY SAVINGS, LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

399 NW 2ND AVE.  
SUITE 206  
BOCA RATON, NV 33432

**New Principal Place of Business:**

**Current Mailing Address:**

7491 N. FEDERAL HWY  
SUITE C-5 #307  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 27-1905555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GALLETS, EUNICE  
2825 SW 22ND AVE  
STE. 105  
DELRAY BEACH, FL 33445 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: YOURINCPRO.COM, INC.  
Address: 4421 EDWARD AVE.  
City-St-Zip: LAS VEGAS, NV 89108

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: YOURINCPRO

MGR

04/29/2011

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