

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000095663

**Entity Name:** A BETTER CHOICE LLC

**FILED**  
**Jun 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

19172 MURCOTT DR E  
FORT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

19172 MURCOTT DR E  
FORT MYERS, FL 33967

**New Mailing Address:**

**FEI Number:** 90-0609693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YEOMANS, JOHN D  
19172 MURCOTT DR E  
FORT MYERS, FL 33967 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:** MGRM  
**Name:** YEOMANS, JOHN D  
**Address:** 19172 MURCOTT DR E  
**City-St-Zip:** FORT MYERS, FL 33967

**Title:** MGRM  
**Name:** IBRAHIM, CHRISTINA I  
**Address:** 1609 BEACHWOOD DRIVE  
**City-St-Zip:** NORTH FORT MYERS, FL 33903

**Title:** MGRM  
**Name:** JOHNSON, CONNIE S  
**Address:** 3144 NW 34TH AVENUE  
**City-St-Zip:** OKEECHOBEE, FL 34972

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:** JOHN YEOMANS

MGRM

06/08/2011

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