

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000032390

Entity Name: BU LIFE SOLUTIONS, LLC

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

242 S WASHINGTON BLVD (SR 301) #119  
SARASOTA, FL 34236

**New Principal Place of Business:**

18 GOODRICH AVENUE  
SARASOTA, FL 34236

**Current Mailing Address:**

242 S WASHINGTON BLVD (SR 301) #119  
SARASOTA, FL 34236

**New Mailing Address:**

18 GOODRICH AVENUE  
SARASOTA, FL 34236

FEI Number: 46-0525734

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TK REGISTERED AGENT INC  
101 E KENNEDY BLVD STE 2700  
TAMPA, FL 33602 US

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

ROSENTHAL, MARC I  
18 GOODRICH AVENUE  
SARASOTA, FL 34236 US

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: MARC ROSENTHAL

04/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PCEO  
Name: ROSENTHAL, MARC I  
Address: 18 GOODRICH AVENUE  
City-St-Zip: SARASOTA, FL 34236

Title: VPS  
Name: ROSENTHAL, SHOSHANA  
Address: 18 GOODRICH AVENUE  
City-St-Zip: SARASOTA, FL 34236

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: MARC ROSENTHAL

PCEO

04/16/2012

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