

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000092359

Entity Name: BREATHE AGAIN, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1170 4TH STREET  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 741  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

FEI Number: 45-2971319

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUND, CHARLES B  
2429 PIONEER TRAIL  
NEW SMYRNA BEACH, FL 32168 US

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

HUND, CHARLES B  
1002 N. LEAVITT AVE  
ORANGE CITY, FL 32763 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/30/2012

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HUND, CHARLES B  
Address: 1002 N. LEAVITT AVE.  
City-St-Zip: ORANGE CITY, FL 32763

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: CHARLES B. HUND

MGR

04/30/2012

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