

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004053

**FILED**  
**Jan 16, 2007**  
**Secretary of State**

**Entity Name:** NATURE'S REST MARKETING, L.L.C.

**Current Principal Place of Business:**

500 SOUTH FALKENBURG ROAD  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

500 SOUTH FALKENBURG ROAD  
TAMPA, FL 33619

**New Mailing Address:**

**FEI Number:** 59-3715286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANTINORI, STEVEN J  
500 SOUTH FALKENBURG ROAD  
TAMPA, FL 33619 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: CEO ( ) Delete  
Name: ANTINORI, STEVE  
Address: 500 SOUTH FAULKENBURG ROAD  
City-St-Zip: TAMPA, FL 33619

Title: C ( ) Delete  
Name: RUSSO, STEVE  
Address: 500 SOUTH FAULKENBURG ROAD  
City-St-Zip: TAMPA, FL 33619

Title: CFO ( ) Delete  
Name: LUEPTOW, RON  
Address: 500 SOUTH FAULKENBURG ROAD  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: ANTINORI, STEVEN J  
Address: 500 SOUTH FAULKENBURG ROAD  
City-St-Zip: TAMPA, FL 33619

Title: COO (X) Change ( ) Addition  
Name: MARTIN, KEVIN  
Address: 500 SOUTH FAULKENBURG ROAD  
City-St-Zip: TAMPA, FL 33619

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: RON LUEPTOW

CFO

01/16/2007

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