## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000001145

Entity Name: MASSAGE CONNECTION STUDIOS, LLC

Apr 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2056 N.E. COACHMAN ROAD CLEARWATER, FL 33765

**Current Mailing Address: New Mailing Address:** 

2056 N.E. COACHMAN ROAD CLEARWATER, FL 33765

FEI Number: 20-8322707 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

MANAGING MEMBERS/MANAGERS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

ABBOTT, HUGH M SR. Name: Name: Address: 2056 N.E. COACHMAN ROAD Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: VELLUCCI, LAURIE Name: ABBOTT, DONNAMARIE

Address: 2056 N.E. COACHMAN ROAD Address: 2176 PORTOFINO PLACE UNIT 266 City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: PALM HARBOR, FL 34683

I hereby certify that the information supplied with this filing does not qualify 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: HUGH M ABBOTT, SR **MGMR** 04/14/2009