

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000095870

**FILED  
Jan 20, 2012  
Secretary of State**

**Entity Name:** AT HOME WITH HEIDI LLC

**Current Principal Place of Business:**

8150 WEEPING WILLOW STREET  
BROOKSVILLE, FL 34613

**New Principal Place of Business:**

**Current Mailing Address:**

8150 WEEPING WILLOW STREET  
BROOKSVILLE, FL 34613

**New Mailing Address:**

**FEI Number:** 45-3043813      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FARR, HEIDI L  
8150 WEEPING WILLOW STREET  
BROOKSVILLE, FL 34613 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:** FARR, HEIDI L  
**Address:** 8150 WEEPING WILLOW STREET  
**City-St-Zip:** BROOKSVILLE, FL 34613

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: HEIDI L FARR      MGRM      01/20/2012

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