

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100709

Entity Name: CHERRIES, LLC

FILED
Jan 10, 2009
Secretary of State

Current Principal Place of Business:

5444 PARK BOULEVARD
C/O HAYES FLORIST
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

5444 PARK BOULEVARD
C/O HAYES FLORIST
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 87-0793311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPTON, JOHN M
1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

CHERRY, MICHAEL S
408 20TH AVENUE
INDIAN ROCKS BEACH, FL 33785 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: MICHAEL CHERRY

01/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHERRY, MIKE
Address: 650 MEHLENBACHER ROAD
City-St-Zip: BELLEAIR BLUFFS, FL 33756 US

Title: MGR () Delete
Name: CHERRY, DIANE
Address: 650 MEHLENBACHER ROAD
City-St-Zip: BELLEAIR BLUFFS, FL 33756 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHERRY, MIKE
Address: 408 20TH AVENUE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Title: MGR (X) Change () Addition
Name: CHERRY, DIANE
Address: 408 20TH AVENUE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

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: MICHAEL CHERRY

MGR

01/10/2009

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