

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018240

Entity Name: SHAPEMASTER FLORIDA, LLC

FILED  
Apr 03, 2009  
Secretary of State

**Current Principal Place of Business:**

7853 2ND AVENUE SOUTH  
ST. PETERSBURG, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

101 E. KENNEDY BLVD.  
SUITE 3170 C/O MANEY & GORDON, P.A.  
TAMPA, FL 33602 US

**New Mailing Address:**

7853 2ND AVENUE SOUTH  
ST. PETERSBURG, FL 33707 US

FEI Number: 75-3266903

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MANEY AND GORDON, P.A.  
101 E. KENNEDY BLVD.  
SUITE 3170  
TAMPA, FL 33602 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 ( ) Delete  
Name: FUN COAST FLORIDA, L, LC  
Address: 7853 2ND AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33707 US

**ADDITIONS/CHANGES:**

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

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: ROBERT CHAPMAN

MGR

04/03/2009

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