

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000056950

Entity Name: SHAFER ESTATES, LLC

FILED  
Mar 08, 2012  
Secretary of State

**Current Principal Place of Business:**

2977 LYNN DR.  
WILLOUGHBY HILLS, OH 44092 US

**Current Mailing Address:**

2977 LYNN DR.  
WILLOUGHBY HILLS, OH 44092 US

**New Principal Place of Business:**

C/O NANCY ARCHANGEL  
2977 LYNN DRIVE  
WILLOUGHBY HILLS, OH 44092 US

**New Mailing Address:**

C/O NANCY ARCHANGEL  
2977 LYNN DRIVE  
WILLOUGHBY HILLS, OH 44092 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

MCCRORY LAW FIRM  
150 LAISHLEY CT. SUITE 122  
PUNTA GORDA, FL 33950 US

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

MCCRORY LAW FIRM, PL  
150 LAISHLEY CT, SUITE 122  
PUNTA GORDA, FL 33950 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: MCCRORY LAW FIRM, PL 03/08/2012  
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ARCHANGEL, NANCY J  
Address: 2977 LYNN DRIVE  
City-St-Zip: WILLOUGHBY HILLS, OH 44092 US

Title: MGRM  
Name: SHAFER, WILLIAM JAMES  
Address: C/O NANCY J ARCHANGEL, 2977 LYNN DRIVE  
City-St-Zip: WILLOUGHBY HILLS, OH 44092

Title: MGRM  
Name: EBERT, KAREN A  
Address: 3923 MURRY HILL COURT  
City-St-Zip: MURRYSVILLE, PA 15668

Title: MGRM  
Name: LACAVA, MARY LOU  
Address: 13744 FOX HILL DRIVE  
City-St-Zip: NOVELTY, OH 44072

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: NANCY J ARCHANGEL MGRM 03/08/2012  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date