

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103895

FILED
Mar 17, 2009
Secretary of State

Entity Name: SHANARD ENTERPRISES, LLC

Current Principal Place of Business:

5052 TAMIAMI TRAIL NORTH
NAPLES, FL 33940 US

New Principal Place of Business:

Current Mailing Address:

5052 TAMIAMI TRAIL NORTH
NAPLES, FL 33940 US

New Mailing Address:

FEI Number: 20-4933362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANARD, DAVID S
5052 TAMIAMI TRAIL NORTH
NAPLES, FL 33940 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: MGR () Delete
Name: SHANARD, JOHN D
Address: 5052 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 33940 US

Title: MGRM () Delete
Name: SHANOID, DAVID S
Address: 113 FORESTWOOD DR
City-St-Zip: NAPLES, FL 34110

Title: MGR () Delete
Name: HOGG, KARLA
Address: 250 N BETH CLUB BLVD
City-St-Zip: REDDINGTON, FL 33708

ADDITIONS/CHANGES:

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

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

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: DAVID J. SHANARD

MGR

03/17/2009

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