

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028786

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** SHARON FEERY'S YOGA FOR THE HIGHER POWERED LLC

**Current Principal Place of Business:**

955 EGRET CIR B203  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

830 MT LAUREL RD  
HAINESPORT, NJ 08036

**New Mailing Address:**

**FEI Number:** 26-2180261

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEERY, CHRISTOPHER  
955 EGRET CIR B203  
DELRAY BEACH, FL 33444 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: FEERY, SHARON  
Address: 955 EGRET CIR B203  
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGRM ( ) Delete  
Name: FEERY, CHRISTOPHER  
Address: 955 EGRET CIR B203  
City-St-Zip: DELRAY BEACH, FL 33444

**ADDITIONS/CHANGES:**

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:** SHARON FEERY

MGR

04/21/2009

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