

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 11, 2009
Secretary of State**

DOCUMENT# L02000027905

Entity Name: SCHOOL UNIFORMS & MONOGRAMMING, LLC

Current Principal Place of Business:

310 INDIAN HILLS DR.
FT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

310 INDIAN HILLS DR.
FT PIERCE, FL 34982

New Mailing Address:

FEI Number: 06-1655407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIDES, DEBRA F
310 INDIAN HILLS DR.
FT PIERCE, FL 34982 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: SIDES, DEBRA
Address: 310 INDIAN HILLS DR.
City-St-Zip: FORT PIERCE, FL 34982

Title: MGRM () Delete
Name: MOSHER, ELIZABETH
Address: 310 INDIAN HILLS DR.
City-St-Zip: FORT PIERCE, FL 34982

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: DEBRA SIDES

MGRM

03/11/2009

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