

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000074144

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** SCHERER I, LLC

**Current Principal Place of Business:**

107 HAMPTON ROAD, STE. 190  
CLEARWATER, FL 33759

**New Principal Place of Business:**

4500 140TH AVENUE NORTH  
SUITE 209  
CLEARWATER, FL 33762

**Current Mailing Address:**

107 HAMPTON ROAD, STE. 190  
CLEARWATER, FL 33759

**New Mailing Address:**

4500 140TH AVENUE NORTH  
SUITE 209  
CLEARWATER, FL 33762

**FEI Number:** 47-0946041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HINES, BRAD  
100 SECOND AVE SOUTH  
SUITE 301N  
SAINT PETERSBURG, FL 33701 US

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

HINES, BRAD  
116 SIXTH STREET NORTH  
SAINT PETERSBURG, FL 33701 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:

04/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCHERER, JOHN C  
Address: 4500 140TH AVENUE NORTH, SUITE 209  
City-St-Zip: CLEARWATER, FL 33762

Title: MGRM  
Name: SCHERER, DAVID K  
Address: 4500 140TH AVENUE NORTH, SUITE 209  
City-St-Zip: CLEARWATER, FL 33762

Title: MGRM  
Name: HOWARD, CHRISTOPHER S  
Address: 4500 140TH AVENUE NORTH, SUITE 209  
City-St-Zip: CLEARWATER, FL 33762

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: JOHN C SCHERER

MGRM

04/25/2012

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