


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

FILED  
 03-07-2008 90227 029 \*\*\*138.00  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 L04000091759

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DOCUMENT # L04000091759  
 1. Entity Name  
 STICKY BOTTOM, L.L.C.



Principal Place of Business      Mailing Address  
 22 RICHMOND AVE                      P.O. BOX 220  
 NEW SMYRNA BEACH, FL 32169      NEW SMYRNA BEACH, FL 32170

**DO NOT WRITE IN THIS SPACE**



02282008No Chg-LLC      CR2E083 (12/07)

4. FEI Number 20-1934806	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 DISBROW, BRYAN J  
 4707 S ATL AVE  
 NEW SMYRNA BEACH, FL 32169

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DISBROW, BRYAN J 22 RICHMOND AVE NEW SMYRNA BEACH, FL 32169
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Bryan J Disbrow*      2/29/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #