

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005243

Entity Name: PARTY EVERMORE, LLC

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

5585 PALMER CROSSING  
SARASOTA, FL 34233

## New Principal Place of Business:

5585 PALMER CROSSING DR.  
SARASOTA, FL 34233

## Current Mailing Address:

5585 PALMER CROSSING  
SARASOTA, FL 34233

## New Mailing Address:

5585 PALMER CROSSING DR.  
SARASOTA, FL 34233

FEI Number: 20-4599813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHANDLER, JAMES R III  
1834 MAIN STREET  
SARASOTA, FL 34236 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: QUILLEN, MICHAEL L  
Address: 4870 S. TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34231

Title: MGRM ( ) Delete  
Name: GOWAN, MICHAEL T  
Address: 4870 S. TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34231

## 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: MICHAEL T. GOWAN

MGRM

04/15/2009

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