

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033036

FILED
May 01, 2009
Secretary of State

Entity Name: SHERRI MARIE, L.L.C.

Current Principal Place of Business:

731 NORTH EAST 5TH STREET
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

2520NORTHTURKEYOAKDRIVE
CRYSTAL RIVER, FL 34429

Current Mailing Address:

2393 WEST FAIRWAY LOOP
CITRUS SPRINGS, FL 34434

New Mailing Address:

FEI Number: 11-3773938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HAMMOND, KARL O
2393 WEST FAIRWAY LOOP
CITRUS SPRINGS, FL 34434 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HAMMOND, KARL O
Address: 2393 WEST FAIRWAY LOOP
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: MGRM () Delete
Name: HAMMOND, SHERRI M
Address: 2393 WEST FAIRWAY LOOP
City-St-Zip: CITRUS SPRINGS, FL 34434

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: KARL HAMMOND

MGRM

05/01/2009

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