

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000045297

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SHANE'S FLOORCOVERING LLC

**Current Principal Place of Business:**

8990 E. SWEETWATER DR.  
INVERNESS, FL 34450

**New Principal Place of Business:**

3619 HAVENWOOD RD.  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

8990 E. SWEETWATER DR.  
INVERNESS, FL 34450

**New Mailing Address:**

3619 HAVENWOOD RD.  
MIDDLEBURG, FL 32068

**FEI Number:** 35-2275444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, MATTHEW S  
8990 E. SWEETWATER DR.  
INVERNESS, FL 34450 US

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

THOMAS, MATTHEW S  
3619 HAVENWOOD RD  
MIDDLEBURG, FL 32068 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: THOMAS, MATTHEW S  
Address: 3619 HAVENWOOD RD.  
City-St-Zip: MIDDLEBURG, FL 32068

Title: MGRM  
Name: THOMAS, SHAUNA P  
Address: 3619 HAVENWOOD RD.  
City-St-Zip: MIDDLEBURG, FL 32068

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: SHAUNA THOMAS

MGRM

04/30/2012

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