

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073863

FILED
May 06, 2008
Secretary of State

Entity Name: BEADNIKS OF ST. ARMANDS CIRCLE, LLC

Current Principal Place of Business:

12 NORTH BOULEVARD OF PRESIDENTS
STORE #1
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

12 NORTH BOULEVARD OF PRESIDENTS
STORE #1
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 20-3292760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, THOMAS
7215 CHATSWORTH CT.
UNIVERSITY PARK, FL 34201 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: RICHARDSON, THOMAS M
Address: 97 HVOSLEF WAY, PO BOX 2107
City-St-Zip: VINEYARD HAVEN, MA 02568 US

Title: MGRM () Delete
Name: COOK, THERESA A
Address: 97 HVOSLEF WAY
City-St-Zip: VINEYARD HAVEN, MA 02568 US

Title: MGRM () Delete
Name: RICHARDSON, ERIN L
Address: 2700 COCONUT BAY LANE #1-L
City-St-Zip: SARASOTA, FL 34237 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ERIN RICHARDSON

MANA

05/06/2008

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