

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082640

Entity Name: SHARP AND SALLY, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

2221 POST STREET
JACKSONVILLE, FL 32204

Current Mailing Address:

317 EAST CHURCH STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

5921 RICHARD STREET
STE 1
JACKSONVILLE, FL 32216 US

New Mailing Address:

5921 RICHARD STREET
STE 1
JACKSONVILLE, FL 32216 US

FEI Number: 20-3442461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALL, HAYWOOD M
50 NORTH LAURA STREET, SUITE 2925
JACKSONVILLE, FL 32202 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: SHARP, SARAH B
Address: 1098 ROSEDALE ROAD NE
City-St-Zip: ATLANTA, GA 30306

Title: MGRM () Delete
Name: SHARP, MICHAEL C
Address: 1098 ROSEDALE ROAD NE
City-St-Zip: ATLANTA, GA 30306

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHARP, SARAH B
Address: 2221 POST STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM (X) Change () Addition
Name: SHARP, MICHAEL C
Address: 2221 POST STREET
City-St-Zip: JACKSONVILLE, FL 32204

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 SHARP

MGRM

04/07/2009

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