

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000002856

FILED
Apr 29, 2008
Secretary of State

Entity Name: JULIE TAYLOR UNLIMITED CREATIONS LLC

Current Principal Place of Business:

9624 HEMINGWAY LANE UNIT 4002
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

9624 HEMINGWAY LANE UNIT 4002
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 73-1730313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR SHEMATZ, JULIE A
9624 HEMINGWAY LANE UNIT 4002
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

SHEMATZ, JULIE T
9624 HEMINGWAY LANE UNIT 4002
FORT MYERS, FL 33913 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: JULIE T. SHEMATZ

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TAYLOR SHEMATZ, JULIE A
Address: 9624 HEMINGWAY LANE UNIT 4002
City-St-Zip: FORT MYERS, FL 33913

Title: MGR () Delete
Name: SHEMATZ, STEVE
Address: 9624 HEMINGWAY LANE UNIT 4002
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SHEMATZ, JULIE A
Address: 9624 HEMINGWAY LANE UNIT 4002
City-St-Zip: FORT MYERS, FL 33913

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: JULIE T. SHEMATZ

MGR

04/29/2008

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