

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017008

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: THE FLIP FLOP SHOP, L.L.C.

## Current Principal Place of Business:

2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

## New Principal Place of Business:

14250 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507

## Current Mailing Address:

2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

## New Mailing Address:

14250 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE  
2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

## Name and Address of New Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE  
2045 FOUNTAIN PROFESSIONAL COURT  
SUITE A  
NAVARRE, FL 32566 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: KERRY ANNE SCHULTZ, ESQUIRE

04/15/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: STORY, MARCUS R  
Address: 2721 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM ( ) Delete  
Name: STORY, DANA E  
Address: 2721 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: STORY, MARCUS R  
Address: 14250 PERDIDO KEY DRIVE  
City-St-Zip: PENSACOLA, FL 32507

Title: MGRM (X) Change ( ) Addition  
Name: STORY, DANA E  
Address: 14250 PERDIDO KEY DRIVE  
City-St-Zip: PENSACOLA, FL 32507

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: MARCUS R. STORY

MGRM

04/15/2009

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