2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L06000048442

Entity Name: WATERBURY BEDAZZLED, LLC

Current Principal Place of Business:

25 WILLIAMS STREET
PITTSFIELD, MA 01201

New Principal Place of Business:

Current Mailing Address:

25 WILLIAMS STREET
PITTSFIELD, MA 01201

New Mailing Address:

FEI Number: 03-0592026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TIDWELL, MICHAEL D
811 NORTH SPRING STREET
PENSACOLA, FL 32501 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: ANTHONY, MARGARET M
Address: 25 WILLIAMS STREET
City-St-Zip: PITTSFIELD, MA 01201

Title: MGRM ( ) Delete
Name: ANTHONY, CHRISTIAN J
Address: 25 WILLIAMS STREET
City-St-Zip: PITTSFIELD, MA 01201

Title: MGRM ( ) Delete
Name: ANTHONY, JOHN B
Address: 25 WILLIAMS STREET
City-St-Zip: PITTSFIELD, MA 01201

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: ANTHONY, CHRISTIAN J
Address: 34 COPPER BEECH RD.
City-St-Zip: GREENWICH, CT 06830

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: MARGARET M. ANTHONY MGRM 04/22/2009

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