

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000059632

1. Entity Name

FRAGRANCES OF FLORIDA, LLC



Principal Place of Business

3241 OLD BARN RD., W
PONTE VEDRA BEACH, FL 32082

Mailing Address

3241 OLD BARN RD., W
PONTE VEDRA BEACH, FL 32082

DO NOT WRITE IN THIS SPACE

FILED
Sep 10, 2008 08:00 AM
Secretary of State



09032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

42-1725480

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WESTLING, JANET M
3241 OLD BARN RD., W
PONTE VEDRA BEACH, FL 32082

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renouncing)

DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

000000939445
09/10/08-80005-010 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	WESTLING, JANET M
STREET ADDRESS	3241 OLD BARN RD., W
CITY- ST- ZIP	PONTE VEDRA BEACH, FL 32082
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Janet M. Westly *Sep 9, 2008* 904-285-5000
Date Daytime Phone #