

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100709

Entity Name: CHERRIES, LLC

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236

New Principal Place of Business:

5444 PARK BOULEVARD
C/O HAYES FLORIST
PINELLAS PARK, FL 33781

Current Mailing Address:

1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236

New Mailing Address:

5444 PARK BOULEVARD
C/O HAYES FLORIST
PINELLAS PARK, FL 33781

FEI Number: 87-0793311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPTON, JOHN M
1819 MAIN STREET, SUITE 610
SARASOTA, FL 34236 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: MGR () Delete
Name: CHERRY, MIKE
Address: 32 MOUNTBATTEN DRIVE
City-St-Zip: NORWICH, UK NR6 7PF UK

Title: MGR () Delete
Name: CHERRY, DIANE
Address: 32 MOUNTBATTEN DRIVE
City-St-Zip: NORWICH, UK NR6 7PF UK

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHERRY, MIKE
Address: 650 MEHLENBACHER ROAD
City-St-Zip: BELLEAIR BLUFFS, FL 33756 US

Title: MGR (X) Change () Addition
Name: CHERRY, DIANE
Address: 650 MEHLENBACHER ROAD
City-St-Zip: BELLEAIR BLUFFS, FL 33756 US

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: M. S. CHERRY

MR

01/09/2008

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