

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120793

Entity Name: LUCY & ETHEL, LLC

FILED  
Feb 08, 2007  
Secretary of State

**Current Principal Place of Business:**

401 S. PALM AVENUE, #802  
SARASOTA, FL 342366831

**New Principal Place of Business:**

**Current Mailing Address:**

401 S. PALM AVENUE, #802  
SARASOTA, FL 342366831

**New Mailing Address:**

PO BOX 49165  
SARASOTA, FL 342366165

FEI Number: 20-8062869

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SKOKOS, PETER Z  
1819 MAIN STREET, STE. 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: RIVERA, LESLIE S  
Address: 401 S PALM AVE, #802  
City-St-Zip: SARASOTA, FL 34236

Title: MGRM ( ) Change (X) Addition  
Name: METZ, MARY  
Address: 401 S PALM AVE, PH-A  
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the 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: LESLIE S RIVERA

MGRM

02/08/2007

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