

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015044

Entity Name: SPHERE, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

40 CHARLOTTE STREET
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

40 CHARLOTTE STREET
ST. AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 20-5931703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EGGLESTON, OLIVIA
40 CHARLOTTE ST
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

EGGLESTON, OLIVIA J
40 CHARLOTTE ST
ST AUGUSTINE, FL 32084 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: OLIVIA J. EGGLESTON

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SLEPPY, SANDRA K
Address: 40 CHARLOTTE ST
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGR () Delete
Name: EGGLESTON, HEATHER D
Address: 40 CHARLOTTE STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES:

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

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: SANDRA K.. SLEPPY

MGR

03/20/2009

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