

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000026675

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** MY PET'S CREMATION, LLC

**Current Principal Place of Business:**

2620 HIGHLANDS RD #A  
HARBOUR HEIGHTS, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

2620 HIGHLANDS RD #A  
HARBOUR HEIGHTS, FL 33983

**New Mailing Address:**

**FEI Number:** 20-8658820

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHELBY, TARYN  
359 PAISLEY AVE  
LEHIGH ACRES, FL 33936 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  
**Name:** SHELBY, TARYN  
**Address:** 359 PAISLEY AVE  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** MGR  
**Name:** ANDERSON, J MICHELLE  
**Address:** 359 PAISLEY AVE  
**City-St-Zip:** LEHIGH ACRES, FL 33936

**Title:** MGR  
**Name:** NICHOLS, RONALD D  
**Address:** 250 NE 10TH PLACE  
**City-St-Zip:** CAPE CORAL, FL 33909

I hereby 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:** TARYN SHELBY

PRES

04/05/2011

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