

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/2/2008-90015-046-\$138.75-\$138.75

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN -2 PM 1:18

DOCUMENT # L07000032689

1. Entity Name
THE HEMPSTER'S STITCH, LLC



Principal Place of Business
6301 NORTH 9TH AVENUE, STE. 8
PENSACOLA, FL 32504 US

Mailing Address
6301 NORTH 9TH AVENUE, STE. 8
PENSACOLA, FL 32504 US

5100

5100

2. Principal Place of Business - No P.O. Box #

5100 P. 9th Avenue

3. Mailing Address

5100 P. 9th Avenue

Suite, Apt. #, etc.

L1103

Suite, Apt. #, etc.

L1103

City & State
Pensacola FL

City & State
Pensacola FL

Zip

32504

Country

USA

Zip

32504

Country

USA

04112008 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-8705048

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SUTHERLAND, ROBERT B MR
3025 TURNERS MEADOW ROAD
PENSACOLA, FL 32514

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 re-registering)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

T
NAME SUTHERLAND, ROBERT B MR
STREET ADDRESS 3025 TURNERS MEADOW ROAD
CITY- ST- ZIP PENSACOLA, FL 32514 ☐ Delete

P
NAME KELLEY, HARVEY E JR
STREET ADDRESS 9944 REBEL ROAD
CITY- ST- ZIP PENSACOLA, FL 32526 ☐ Delete

VP
NAME LANPHERE, MICHAEL
STREET ADDRESS ~~11309 OLD BARN LANE~~
CITY- ST- ZIP ~~PENSACOLA, FL 32514~~ ☐ Delete

☐ Delete

☐ Delete

☐ Delete

10. ADDITIONS/CHANGES

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition
2910 Buford Dr. # 1201
Buford, GA 30519

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

Robert B Sutherland

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

4/24/08

Date

850-476-3831

Daytime Phone #