

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072647

FILED  
Jun 15, 2009  
Secretary of State

Entity Name: SHEFFIELD GROUP HOLDINGS, LLC

**Current Principal Place of Business:**

700 S MAGNOLIA CIR  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

700 S MAGNONIA CIR  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

PO BOX 3242  
WEST PALM BEACH, FL 33402

**New Mailing Address:**

FEI Number: 26-0521968      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SHEFFIELD, TUNECIA  
700 S MAGNOLIA CIR  
WEST PALM BEACH, FL 33401      US

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

SHEFFIELD, TUNECIA  
700 S MAGNONIA CIR  
WEST PALM BEACH, FL 33401      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: TUNECIA SHEFFIELD

06/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SHEFFIELD, TUNECIA  
Address: 11380 PROSPERITY FARMS ROAD, #221E  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: SHEFFIELD, TUNECIA  
Address: P.O. BOX 3242  
City-St-Zip: WEST PALM BEACH, FL 33401

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: TUNECIA SHEFFIELD

MGR

06/15/2009

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