

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086880

FILED
Apr 18, 2009
Secretary of State

Entity Name: ETCETERA BY BROADY, LLC

Current Principal Place of Business:

3390 FISHER RD
DUNEDIN, FL 34698 US

New Principal Place of Business:

21748 MCCALLIE CT
LAND O LAKES, FL 34637 US

Current Mailing Address:

3390 FISHER RD
DUNEDIN, FL 34698 US

New Mailing Address:

21748 MCCALLIE CT
LAND O LAKES, FL 34637 US

FEI Number: 87-0810356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPEROS BROADY, DIANE-ELAINE
3390 FISHER RD
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

SPEROS BROADY, DIANE-ELAINE
21748 MCCALLIE CT
LAND O LAKES, FL 34637 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: DIANE-ELAINE SPEROS BROADY

04/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SPEROS BROADY, DIANE-ELAINE
Address: 3390 FISHER RD
City-St-Zip: DUNEDIN, FL 34698 US

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPEROS BROADY, DIANE-ELAINE OWNER
Address: 21748 MCCALLIE CT
City-St-Zip: LAND O LAKES, FL 34637 US

Title: MGRM () Change (X) Addition
Name: LUTZ, KRIS M OWNER
Address: 21748 MCCALLIE CT
City-St-Zip: LAND O LAKES, FL 34637

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: DIANE-ELAINE SPEROS BROADY

MGRM

04/18/2009

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