

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105922

FILED
Jun 30, 2011
Secretary of State

Entity Name: NW FLORIDA NAIL & SUPPLY, LLC

Current Principal Place of Business:

5650 DIXIE STREET
SUITE B
PENSACOLA, FL 32503 US

New Principal Place of Business:

Current Mailing Address:

5650 DIXIE STREET
SUITE B
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 61-1542697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOWRY, GARY W
5650 DIXIE STREET
SUITE B
PENSACOLA, FL 32503 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: MGRM
Name: LOWRY, GARY
Address: 5650 DIXIE STREET, SUITE B
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM
Name: LOWRY, SCOTT
Address: 5650 DIXIE STREET, SUITE B
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM
Name: LOCKE, CLAYR
Address: 5650 DIXIE STREET, SUITE B
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM
Name: BECKWORTH, JAMES
Address: 5650 DIXIE STREET, SUITE B
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM
Name: ROBERTS, GWEN
Address: 5650 DIXIE STREET, SUITE B
City-St-Zip: PENSACOLA, FL 32503 US

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: GARY LOWRY

PRES

06/30/2011

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