

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000107423

FILED
May 01, 2008
Secretary of State**Entity Name:** 2 SHANES, LLC**Current Principal Place of Business:**7550 MISSION HILLS DR, SUITE 306
NAPLES, FL 34119**New Principal Place of Business:****Current Mailing Address:**7550 MISSION HILLS DR, SUITE 306
NAPLES, FL 34119**New Mailing Address:****FEI Number:** 45-0574032**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TOMLINSON, ANNETTE
15031 PUNTA RASSA ROAD #806
FT. MYERS, FL 33908 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 () Delete
Name: ROBB, SHANE
Address: 15031 PUNTA RASSA ROAD #806
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM () Delete
Name: WALLACE, SHANE
Address: 496 CROSSFIELD CIR.
City-St-Zip: NAPLES, FL 34104

Title: MGRM () Delete
Name: ROBB, RYAN
Address: 496 CROSSFIELD CIR.
City-St-Zip: NAPLES, FL 34104

Title: MGRM () Delete
Name: TOMLINSON, ANNETTE
Address: 15031 PUNTA RASSA RD #806
City-St-Zip: FT. MYERS, FL 33908

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: TOMLINSON, DANNY
Address: 15031 PUNTA RASSA RD. #806
City-St-Zip: FT. MYERS, FL 33908

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: ANNETTE TOMLINSON

MGRM

05/01/2008

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