

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118126

FILED
Jan 15, 2009
Secretary of State

Entity Name: SPOILED ROTTEN DESIGNS, LLC

Current Principal Place of Business:

4461 COMANCHE TRAIL BLVD.
JACKSONVILLE, FL 32259

New Principal Place of Business:

162 ST. GEORGE STREET
#6
ST AUGUSTINE, FL 32084

Current Mailing Address:

4461 COMANCHE TRAIL BLVD.
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 26-1437815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOULERMOS, THOMAS K
695 A1A NORTH, #84
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

KOULERMOS, THOMAS K
4461 COMANCHE TRAIL BLVD
JACKSONVILLE, FL 32259 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: THOMAS K. KOULERMOS

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KOULERMOS, THOMAS K
Address: 695 A1A NORTH, #84
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: COOPER, JUNE
Address: 4461 COMANCHE TRAIL BLVD
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KOULERMOS, THOMAS K
Address: 4461 COMANCHE TRAIL BLVD
City-St-Zip: JACKSONVILLE, FL 32259

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

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: JUNE L. COOPER

MGMR

01/15/2009

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