

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000128236

FILED  
Apr 22, 2008  
Secretary of State

**Entity Name:** SHARP'S ENTERPRISES OF NORTH FLORIDA, L.L.C.

**Current Principal Place of Business:**

2509 WEST 25TH STREET  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 56008  
JACKSONVILLE, FL 322416008

**New Mailing Address:**

**FEI Number:** 52-2397965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARP, ULYSSEE JR  
2509 WEST 25TH STREET  
JACKSONVILLE, FL 32209 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: SHARP, ULYSSEE JR  
Address: 2509 WEST 25TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: MGRM ( ) Delete  
Name: SHARP, LUCINDA  
Address: 2509 WEST 25TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: MGR ( ) Delete  
Name: SHARP, BRE'ANA  
Address: P.O. BOX 56008  
City-St-Zip: JACKSONVILLE, FL 322416008

Title: MGR ( ) Delete  
Name: SHERMAN, CARMELITA  
Address: P.O. BOX 56008  
City-St-Zip: JACKSONVILLE, FL 322416008

**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:

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: ULYSSEE SHARP, JR.

MGRM

04/22/2008

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