

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000000159

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

**Entity Name:** THE POTTERY OF CARLEE WESTON & FRIENDS, LLC

**Current Principal Place of Business:**

344 ALICE AVENUE  
STUART, FL 34994 US

**New Principal Place of Business:**

344 NW ALICE AVENUE  
STUART, FL 34994 US

**Current Mailing Address:**

4832 SE ANCHOR AVENUE  
STUART, FL 34997 US

**New Mailing Address:**

344 NW ALICE AVENUE  
STUART, FL 34994 US

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

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

WESTON, CARLEE E JR.  
4832 SE ANCHOR AVENUE  
STUART, FL 34997 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: MGR  
Name: WESTON, CARLEE E JR  
Address: 4832 SE ANCHOR AVENUE  
City-St-Zip: STUART, FL 34997 US

Title: MGRM  
Name: BERGER, RICHARD E  
Address: 4832 SE ANCHOR AVENUE  
City-St-Zip: STUART, FL 34997 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: CARLEE E. WESTON, JR.

MGR

01/22/2010

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