

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000032590

FILED
Jun 03, 2009
Secretary of State**Entity Name:** SWEET TOOTH BAKERY, LLC**Current Principal Place of Business:**6215 TAYLOR ROAD, STE A
NAPLES, FL 34109**New Principal Place of Business:****Current Mailing Address:**6215 TAYLOR ROAD, STE A
NAPLES, FL 34109**New Mailing Address:****FEI Number:** 26-2304856**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**R & A AGENTS, INC.
850 PARK SHORE DRIVE
NAPLES, FL 34103 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 () Delete
Name: CRIFASI, JR, JACK J
Address: 3199 60TH STREET SW
City-St-Zip: NAPLES, FL 34116**Title:** MGR (X) Delete
Name: CRIFASI, ANTHONY
Address: 3199 60TH STREET SW
City-St-Zip: NAPLES, FL 34116**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: CRIFASI, ANTHONY
Address: 3199 60TH STREET SW
City-St-Zip: NAPLES, FL 34116**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: ANTHONY CRIFASI

MGR

06/03/2009

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