

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000076223

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** SERVICE, SHE WROTE L.L.C.

**Current Principal Place of Business:**

325 THACKERY RD  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

325 THACKERY RD  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

46 EMERALD OAKS LN  
ORMOND BEACH, FL 32174 US

**FEI Number:** 26-3131564

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADRIAN, HEATHER N  
325 THACKERY RD  
ORMOND BEACH, FL 32174 US

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

ADRIAN, HEATHER N  
46 EMERALD OAKS LN  
ORMOND BEACH, FL 32174 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:

04/20/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ADRIAN, HEATHER N  
Address: 325 THACKERY RD  
City-St-Zip: ORMOND BEACH, FL 32174

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: HEATHER N. ADRIAN

MGRM

04/20/2011

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