

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000078612

**Entity Name:** NUSS DREAMS LLC

**FILED**  
**Mar 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

136 GOLDEN GATE POINTE  
APT. 102  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4009  
SARASOTA, FL 34230

**New Mailing Address:**

**FEI Number:** 26-4654292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATERS, ELISABETH  
136 GOLDEN GATE POINTE  
APT. 102  
SARASOTA, FL 34236 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  
**Name:** SCHAERF, SIMONE  
**Address:** 136 GOLDEN GATE POINTE, APT#102  
**City-St-Zip:** SARASOTA, FL 34236

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:** SIMONE SCHAERF

MGRM

03/01/2010

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