

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000080806

Entity Name: WHIMSY, LLC

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2150 SNEED ROAD  
FT. PIERCE, FL 34945

**New Principal Place of Business:**

521 N. 2ND ST.  
FT. PIERCE, FL 34950

**Current Mailing Address:**

2150 SNEED ROAD  
FT. PIERCE, FL 34945

**New Mailing Address:**

521 N. 2ND ST.  
FT. PIERCE, FL 34950

FEI Number: 26-3294237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOWLER, MICHAEL D  
1680 S.W. ST. LUCIE WEST BLVD., STE.204  
PORT ST. LUCIE, FL 34986 US

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

SCOTT, PATRICIA D  
521 N. 2ND ST.  
FORT PIERCE, FL 34950 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: PATRICIA D SCOTT

03/25/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCOTT, PATRICIA D  
Address: 521 N. 2ND ST.  
City-St-Zip: FT. PIERCE, FL 34950

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: PATRICIA D SCOTT

MGRM

03/25/2010

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