

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083025

Entity Name: GG'S JEWELERS, LLC

FILED  
Jan 16, 2009  
Secretary of State

**Current Principal Place of Business:**

1767 LAEKWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906

**New Principal Place of Business:**

1767 LAKEWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906 US

**Current Mailing Address:**

1767 LAEKWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906

**New Mailing Address:**

1767 LAKEWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906

FEI Number: 90-0405883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRICE, GLENNA  
1767 LAEKWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906 US

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

GRICE, GLENNA  
1767 LAKEWOOD RANCH BLVD. #303  
BRADENTON, FL 342114906 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:

01/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GRICE, GLENNA  
Address: 1767 LAEKWOOD RANCH BLVD. #303  
City-St-Zip: BRADENTON, FL 342114906

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GRICE, GLENNA MGRM  
Address: 1767 LAKEWOOD RANCH BLVD. #303  
City-St-Zip: BRADENTON, FL 342114906

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: GLENNA GRICE

MGRM

01/16/2009

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