

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108837

FILED  
Feb 17, 2009  
Secretary of State

**Entity Name:** HAIRCUTS UNLIMITED LAKE CITY, LLC

**Current Principal Place of Business:**

2929 W. US HWY 90  
SUITE #102  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 3566  
LAKE CITY, FL 32056

**New Mailing Address:**

**FEI Number:** 26-3761124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WESTFIELD INVESTMENT GROUP, LLLP  
426 SW COMMERCE DRIVE  
SUITE 130  
LAKE CITY, FL, FL 32025 US

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

WESTFIELD INVESTMENT GROUP, LLLP  
426 SW COMMERCE DRIVE  
SUITE 130  
LAKE CITY, FL 32025 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:

02/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WESTFIELD INVESTMENT, GROUP, LLLP  
Address: 426 SW COMMERCE DR., STE 130  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES:**

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: SCOTT STEWART

MBR

02/17/2009

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