

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000066417

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** SHEARS OF JOY, LLC

**Current Principal Place of Business:**

48 SE OSCEOLA STREET  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

3741 SW COQUINA COVE  
APT # 204  
PALM CITY, FL 34990

**New Mailing Address:**

**FEI Number:** 27-0521207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUFFSMITH, CHERYL  
3741 SW COQUINA COVE  
APT 204  
PALM CITY, FL 34990 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: HUFFSMITH, CHERYL  
Address: 3741 SW COQUINA COVE, APT 204  
City-St-Zip: PALM CITY, FL 34990

Title: MGMR  
Name: CRISTOFORO, NICOLE  
Address: 3347 SW SUNSET TRACE CIRCLE  
City-St-Zip: PALM CITY, FL 34990

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: CHERYL HUFFSMITH

MGRM

04/26/2010

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