

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000000965

**FILED  
Apr 18, 2011  
Secretary of State**

**Entity Name:** SHIRLENE'S SHINING STARS, L. L. C.

**Current Principal Place of Business:**

920 S. LAKE SHORE WAY  
LAKE ALFRED, FL 33850 US

**New Principal Place of Business:**

**Current Mailing Address:**

920 S. LAKE SHORE WAY  
LAKE ALFRED, FL 33850 US

**New Mailing Address:**

P.O. BOX 231  
LAKE ALFRED, FL 33850 US

FEI Number: 27-1729876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KEITH, WILLIAM C  
1517 COMMERCIAL PARK DR  
LAKELAND, FL 33801 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: RIVERS, SHIRLENE  
Address: 920 S. LAKE SHORE WAY  
City-St-Zip: LAKE ALFRED, FL 33850 US

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: SHIRLENE RIVERS

MGRM

04/18/2011

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