

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000079426

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** A BARBERSHOP AT SUMMERFIELD LLC

**Current Principal Place of Business:**

11363 BIG BEND RD  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

11303 CALLAWAY POND DR  
RIVERVIEW, FL 33579

**New Mailing Address:**

**FEI Number:** 27-3135301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPINKS, JAMES D  
10430 FROG POND DR  
RIVERVIEW, FL 33569 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:** MGR  
**Name:** SPINKS, JAMES D  
**Address:** 10430 FROG POND DR  
**City-St-Zip:** RIVERVIEW, FL 33569

**Title:** MGR  
**Name:** SHIELDS, AARON P  
**Address:** 11303 CALLAWAY POND DR  
**City-St-Zip:** RIVERVIEW, FL 33579

**Title:** MGR  
**Name:** TAYLOR, TERRANCE K  
**Address:** 10301 VENITIA REAL AVE #307  
**City-St-Zip:** TAMPA, FL 33647

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:** JAMES SPINKS

JDS

04/12/2011

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