

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000112080

Entity Name: SHADOWS LEASING LLC

FILED  
Feb 22, 2011  
Secretary of State

**Current Principal Place of Business:**

227 SHADOWS DRIVE  
SAUTEE NACOOCHEE, GA 30571

**New Principal Place of Business:**

**Current Mailing Address:**

227 SHADOWS DRIVE  
SAUTEE NACOOCHEE, GA 30571

**New Mailing Address:**

FEI Number: 27-3909263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

NARGI, LOUIS T  
1329 PINEBROOK WAY  
VENICE, FL 34285 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: LOUIS T. NARGI

02/22/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NARGI, CAROL  
Address: 227 SHADOWS DRIVE  
City-St-Zip: SAUTEE NACOOCHEE, GA 30571

Title: MGR  
Name: NARGI, LOUIS  
Address: 227 SHADOWS DRIVE  
City-St-Zip: SAUTEE NACOOCHEE, GA 30571

Title: S  
Name: NARGI, CAROL  
Address: 227 SHADOWS DRIVE  
City-St-Zip: SAUTEE NACOOCHEE, GA 30571

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: LOUIS T. NARGI

MGR.

02/22/2011

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