

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000127020

Entity Name: SHADOWS HOUSE, LLC

**FILED**  
**Jun 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5525 STABLE WAY  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

5525 STABLE WAY  
NAPLES, FL 34114

**New Mailing Address:**

2359 PERIMETER POINTE PARKWAY  
STE 270  
CHARLOTTE, NC 28208

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAYMOND J. BOWIE, ESQ., CHARTERED  
900 6TH AVE SOUTH  
#104  
NAPLES, FL 34102 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: DEVINE, VALARIA  
Address: 5525 STABLE WAY  
City-St-Zip: NAPLES, FL 34114 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: CHRISTIAN AYERS

ACCT

06/15/2011

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